



CITY OF NOTTINGHAM

NINETIETH
ANNUAL REPORT

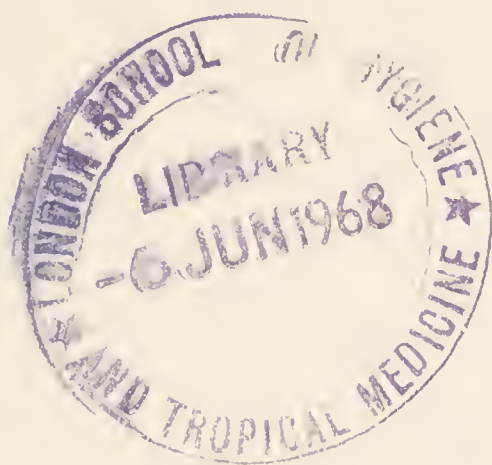
OF THE
HEALTH SERVICES
1962

MEDICAL OFFICER OF HEALTH
WILLIAM DODD, M.D.

NOTTINGHAM

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FOREWORD

Although the infant mortality rate of 25·39 declined from the figure of 27·29 in 1961, it remained higher than that in the five preceding years. One of the factors producing this level of mortality was the number of deaths of children of immigrant parents, the rate applying to those born to West Indian parents being 35·55.

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Previously, I have followed the custom of not seeking out any service or individual for special mention. Indeed, it has been my good fortune to work with men and women, of all the different services, who have repeatedly shown themselves to be devoted to their tasks and serving the public in good measure.

It is, nevertheless, with this in mind that I draw attention to the results produced by the Domiciliary Midwifery Service and the problems with which it is faced.

With an increase of 465 domiciliary births, as compared with 1961, this service has had a considerable additional burden to carry. It has meant a larger case load, one of 110 for the teaching midwife, and of 85 for the non-teaching midwife—which is 30 above the recommended 55. When viewed in the light of recruitment difficulties, this can only be described as a disturbing situation which merits careful appraisal, leading subsequently to effective action.

Especially is it so when the midwife's day is made even heavier by additional nursings for mothers who, though confined in hospital, are discharged home after only one or two days.

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For decades men have been trained as nurses, and more recently have become a fully accepted and valuable addition to the Home Nursing Service. Male home helps are also finding a place in what might be felt to be strictly a female preserve. Nowadays, the last strongholds of either sex are disappearing fast. Shall we, in due course, see men as midwives and health visitors and could this help to resolve staffing difficulties?

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Immunisation is now commenced at an earlier age, when mothers usually bring their infants to the welfare centres more regularly, and this has resulted in an increase in acceptance rates. The development of combined vaccines, which minimise the number of preventive injections given in childhood, has also helped in this respect.

It is likely that acceptance of poliomyelitis vaccine could be raised to the level of that for triple antigen if the two courses were concurrently commenced at 2 months of age. This would probably confer greater protection on the community, and therefore the individual, even if it resulted in a slightly reduced antibody response. However, recent work seems to indicate that there is no such reduction and this lends force to the adoption of such a programme.

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New legislation made it possible during the year to begin a systematic attack on the many problems associated with those houses which are let in multiple occupation and in which standards of accommodation are far from satisfactory.

Effective action in securing the necessary improvements has however, had to be applied with moderation to minimise the creation of homelessness by the displacement of persons from over-crowded premises.

★ ★ ★

In June the Central Electricity Generating Board applied to the Minister of Power for consent to establish a very large coal-fired power station at Ratcliffe-on-Soar, some $3\frac{1}{2}$ miles from the City boundary. This application followed the rejection, after a public enquiry held two years ago, of a proposal for a similar station at Holme Pierrepont, details of which were included in last year's report. Continuing in their view that adding further pollution to the City's atmosphere would create an increased hazard to the health of the community, the Corporation decided to stand once again as objectors. A public enquiry was arranged to take place early in 1963.

★ ★ ★

Local authorities were requested to submit, by 31st October, a Development Plan for their health and welfare services to cover the next decade as a complement to the one produced for the hospital services in this country. The preparation of the plan required imagination and much careful thought and details of it have been included in this report. Its implementation should enable the preventive and supportive health services to fulfil the larger role which will be required of them in the future.

On 6th April Mr. A. Wade, M.B.E., the Chief Public Health Inspector, retired, having held that office since 1st June, 1929, during which time he was awarded the M.B.E. It is a pleasure to record appreciation of his great abilities and the services he rendered to the City.

WILLIAM DODD.

28th March, 1963.

HEALTH DEPARTMENT,
HUNTINGDON HOUSE,
NOTTINGHAM.

TELEPHONE No. 50551

HEALTH REPORT 1962

PART I

VITAL STATISTICS

VITAL STATISTICS*

						1962	1961
POPULATION	..	..	..	..	..	314,360	313,280
AREA IN ACRES	..	..	..	..	..	18,364	18,364
NO. OF MARRIAGES	..	..	..	..	..	2,606	2,559
<hr/>							
LIVE BIRTHS							
LEGITIMATE	MALES	2,825	FEMALES	2,644	..	5,469	5,177
ILLEGITIMATE	„	368	„	345	..	713	646
„	births expressed as a percentage of all						
	births	..	..	..	..	11·53	11·09
TOTAL NO. OF BIRTHS			..	..	..	6,182	5,823
Live Birth Rate per 1,000 of population			..	..	..	19·67	18·59
STILLBIRTHS							
LEGITIMATE	MALES	54	FEMALES	50	..	104	105
ILLEGITIMATE	„	5	„	9	..	14	14
TOTAL NO. OF STILLBIRTHS			..	..	..	118	119
Stillbirth Rate per 1,000 live and stillbirths			..	..	..	18·73	20·03
TOTAL NO. OF LIVE AND STILLBIRTHS			..	..	..	6,300	5,942
INFANT DEATHS							
Infant Mortality Rate		..	..	..	..	157	161
„		„	„	„	„	25·39	27·65
„		„	„	„	„	24·86	26·27
„		„	„	„	„	29·45	38·70
Neo-Natal Mortality Rate—first four weeks of life			..	..	..	16·17	20·61
Early Neo-Natal Mortality Rate—first week			„	„	„	14·23	16·49
Peri-Natal Mortality Rate			..	..	..	32·69	36·18
MATERNAL DEATHS (see page 21)							
Maternal Mortality Rate per 1,000 live and stillbirths			..	..	..	5	2
			..	..	..	0·79	0·34
DEATHS AT ALL AGES							
MALES		1,837	FEMALES	1,777	..	3,614	3,849
Death Rate per 1,000 of population			..	..	..	11·49	12·29

* Provisional. See page 11.

POPULATIONS, BIRTH, DEATH, INFANT AND MATERNAL MORTALITY RATES

	Estimated Population	Birth-rate	Death-rate	Infant mortality	Maternal mortality
		per 1,000 population		rate per 1,000 live births total births	
1851-1855 ..	55,883	—	—	—	—
1856-1860 ..	59,741	36·8	27·2	209	—
1861-1865 ..	75,765	34·8	24·9	192	—
1866-1870 ..	88,040	31·3	23·8	200	—
1871-1875 ..	89,510	34·1	24·9	192	—
1876-1880 ..	142,756*	34·6	21·7	175	—
1881-1885 ..	208,937*	36·6	20·9	174	—
1886-1890 ..	229,762	30·4	17·9	168	—
1891-1895 ..	219,770	29·5	18·3	174	—
1896-1900 ..	235,200	28·9	18·5	191	—
1901-1905 ..	246,020	27·7	17·2	170	—
1906-1910 ..	260,483	26·1	15·8	152	4·54
1911-1915 ..	264,316	22·9	15·1	137	3·66
1916-1920 ..	264,151	19·1	16·0	113	4·66
1921-1925 ..	268,900	20·4	12·9	90	3·34
1926-1930 ..	266,000	17·5	13·6	88	3·78
1931 ..	270,900	17·2	13·6	82	4·1
32 ..	270,700	16·4	12·5	80	3·0
33 ..	283,030†	15·8	13·4	85	3·5
34 ..	281,850	15·6	12·3	69	2·4
35 ..	280,200	15·7	12·5	81	4·4
36 ..	279,400	15·2	13·2	89	4·5
37 ..	278,800	16·0	13·4	80	2·8
38 ..	278,300	15·6	12·7	71	1·8
39 ..	278,800	15·8	13·3	66	1·3
40 ..	263,600	16·5	15·5	61	2·7
41 ..	258,100	16·0	14·0	80	2·8
42 ..	255,900	18·2	13·1	62	2·5
43 ..	265,400	19·1	14·3	65	1·38
44 ..	262,310	21·7	13·2	56	·85
45 ..	265,090	19·7	12·9	53	1·33
46 ..	283,160	22·0	12·5	42	1·09
47 ..	291,150	23·9	12·3	50	1·26
48 ..	296,900	19·8	10·9	44	·49
49 ..	300,640	18·9	11·8	38	·51
50 ..	307,000	17·4	11·1	31	·37
51 ..	306,600	16·97	11·98	33	·57
52 ..	310,700†	16·71	10·74	28	·38
53 ..	311,500	16·64	11·01	27	·77
54 ..	311,500	16·05	10·61	24	·59
55 ..	312,000	15·67	11·28	28	·60
56 ..	312,500	16·50	11·15	22	·76
57 ..	312,600	17·52	10·82	23	·36
58 ..	313,000	17·82	10·93	22	1·05
59 ..	313,300	17·95	11·48	24	·35
60 ..	313,760	18·26	10·97	23	·51
61 ..	313,280	18·59	12·29	27	·34
62 ..	314,360	19·67	11·49	25	·79

* Borough Boundary Extension.

† City Boundary Extension.

ANALYSIS OF DEATHS FROM BIRTH TO 5 YEARS*

REGISTERED CAUSES OF DEATH	0—6 days	7—13 days	14—20 days	21—27 days	TOTAL UNDER 28 DAYS	TOTAL UNDER 1 YEAR	1 year	2 years	3 years	4 years	TOTAL 1—4 YEARS
Prematurity	47	2	—	—	49	50	—	—	—	—	—
Congenital malforma- tions	12	2	1	3	18	30	—	1	—	—	1
Atelectasis	13	—	—	1	14	14	—	—	—	—	—
Bronchitis	—	—	—	—	—	12	—	—	—	—	—
Pneumonia, all forms ..	2	—	—	—	2	11	2	1	—	—	3
Birth injuries ..	8	—	—	—	8	8	—	—	—	—	—
Other respiratory diseases and conditions ..	—	—	1	1	2	4	—	—	—	—	—
Gastro-intestinal infection including dysentery ..	—	—	—	—	—	4	3	—	—	—	3
Non-meningococcal meningitis ..	—	—	—	—	—	3	—	—	—	—	—
Haemolytic disease of the newborn ..	1	—	—	—	1	1	—	—	—	—	—
Whooping cough ..	—	—	—	—	—	1	—	—	—	—	—
Meningococcal infections ..	—	—	—	—	—	1	1	—	—	—	1
Malignant neoplasms ..	—	—	—	—	—	1	1	—	3	—	4
Accident (a) motor ..	—	—	—	—	—	—	—	1	—	—	1
(b) other ..	—	—	—	—	—	—	2	—	1	—	3
Other conditions ..	5	—	—	1	6	17	1	—	—	—	1
TOTALS ..	88	4	2	6	100	157	10	3	4	—	17

*Compiled from Local Registrars' Death Returns.

FINAL STATISTICS

			1962	1961	1960	1959	1958
POPULATION	..	..	314,360	313,280	313,760	313,300	313,000
AREA IN ACRES	..	..	18,364	18,364	18,364	18,364	18,364
NO. OF MARRIAGES	..	..	2,606	2,559	2,738	2,633	2,580

Live Births

LEGIT.	M. 2,846	F. 2,638	..	5,484	5,177	5,205	5,077	5,063
ILLEGIT.	M. 392	F. 367	..	759	646	524	547	514
ILLEGIT. expressed as percentage								
	of all births	..	..	12·16%	11·09%	9·15%	9·73%	9·2%
TOTAL BIRTHS	..	..	..	6,243	5,823	5,729	5,624	5,577
LIVE BIRTH RATE	..	..	..	19·86	18·59	18·26	17·95	17·82

Stillbirths

LEGIT.	M. 57	F. 49	..	106	105	100	100	109
ILLEGIT.	M. 5	F. 10	..	15	14	15	14	22
TOTAL STILLBIRTHS	..	..	..	121	119	115	114	131
STILLBIRTH RATE	..	..	..	19·04	20·03	19·68	19·87	22·95
Total Live and Stillbirths	..	..	..	6,364	5,942	5,844	5,738	5,708

Infant Deaths

				154	161	133	136	123
Infant Mort. Rate—Total	..	..	..	24·67	27·65	23·22	24·18	22·05
„ „ „ —legit. births	..	..	..	25·35	26·27	23·63	24·62	20·94
„ „ „ —illegit. births	..	..	..	19·76	38·70	19·08	20·11	33·07
Neo-Natal Mortality Rate	..	..	..	15·54	20·61	15·36	17·25	15·42
Early Neo-Natal Mortality Rate	..	..	..	13·78	16·49	12·22	13·33	11·83
Peri-Natal Mortality Rate	..	..	..	32·53	36·18	31·66	32·93	34·51

Maternal Deaths

	..	..	..	3	2	3	2	5
MATERNAL MORTALITY RATE	..	..	..	0·47	0·34	0·51	0·35	1·05

Deaths at all Ages

M. 1,925	F. 1,892	..	..	3,817	3,849	3,441	3,597	3,421
DEATH RATE	..	..	..	12·14	12·29	10·97	11·48	10·93

ANALYSIS OF DEATHS

Total Deaths	1962	1961	1960	1959	1958
	3,817	3,849	3,441	3,597	3,421
Deaths under 1 year	154	161	133	136	123
„ 1—4 years	17	17	22	22	23
„ 5—44 „	173	199	199	189	171
„ 45—64 „	850	913	824	876	817
„ 65 and over	2,623	2,559	2,263	2,374	2,287
Causes of Deaths:—					
*Heart disease	534	559	470	499	492
Vascular lesions of nervous system ..	496	508	462	501	441
Coronary disease, angina	496	453	503	430	434
Bronchitis	403	341	242	298	322
Defined and ill-defined diseases— various	341	372	283	277	273
*Malignant and lymphatic neoplasms..	318	295	288	286	255
Pneumonia	217	206	209	193	173
Malignant neoplasm, lung, bronchus	186	196	172	166	144
*Circulatory disease	174	145	152	146	130
Malignant neoplasm, stomach	76	101	76	96	89
Hypertension with heart disease ..	74	74	66	92	100
Accidents, other than motor vehicle accidents	64	71	75	72	79
Malignant neoplasm, breast	44	67	71	62	58
Suicide	42	32	33	44	36
Motor vehicle accidents	41	46	42	57	30
Congenital malformations	41	38	35	33	37
Malignant neoplasm, uterus	40	33	31	39	43
*Diseases of respiratory system	39	21	37	52	22
Influenza	29	86	9	57	32
Ulcer of stomach and duodenum ..	28	46	31	46	40
Tuberculosis, respiratory	26	22	25	26	49
Gastritis, enteritis and diarrhoea ..	23	17	13	16	12
Nephritis and nephrosis	22	25	25	25	28
Diabetes	22	21	30	16	28
Hyperplasia of prostate	18	24	21	17	10
Leukaemia, aleukaemia	9	24	9	22	23
Homicide and operations of war ..	4	2	5	2	1
Pregnancy, childbirth, abortion ..	3	2	3	2	6
Tuberculosis, non respiratory	2	5	2	3	5
Meningococcal infection	2	1	2	—	2
Syphilitic disease	1	9	7	12	12
Measles	1	1	—	1	2
Whooping cough	1	—	—	—	—
Other infective and parasitic diseases	—	6	12	8	12
Acute poliomyelitis	—	—	—	1	1
Diphtheria	—	—	—	—	—

* Not given otherwise in table.

PART II

THE PERSONAL HEALTH SERVICES

National Health Service Acts 1946-1961

Public Health Acts, 1936-1961

Mental Health Act 1959

HEALTH CENTRES

MATERNAL AND CHILD HEALTH

HOME NURSING

INFECTIOUS DISEASE CONTROL

AMBULANCE

PREVENTION OF ILLNESS, CARE AND
AFTER-CARE

HOME HELP

MENTAL HEALTH

HEALTH CENTRES

THE JOHN RYLE HEALTH CENTRE

General practitioners and the local health authority continued to provide services from the Centre, though only three of the four doctors' suites were occupied.

The arrangement whereby a twenty-four hour telephone service was maintained for doctors' messages was discontinued in July, following discussions with representatives of the Local Executive Council. In consequence of this decision, the secretary was transferred to other work in the department and her flat was made available for a member of the Home Nursing Service.

Reference has been made in previous reports to the unsatisfactory location of the Centre in relation to the fully developed Clifton estate. In order to provide child welfare services for the residents at the other end of the estate, a weekly infant clinic was commenced in November in rented premises in that area, as mentioned in the section on welfare centres (page 41).

High priority was given in the Ten Year Development Plan to the construction of more suitable accommodation on the site which is reserved at the centre of the estate opposite the main shopping area.

MATERNAL AND CHILD HEALTH

Live Births. The number of live births was 6,182 an increase of 6% over the figure for the previous year of 5,823, giving a birth rate of 19·67 compared with 18·59 for 1961.

Stillbirths. There was a reduction in the incidence of stillbirths which numbered 118 giving a rate of 18·73. The stillbirth rate for 1961 was 20·03.

The analysis of the results of the enquiry carried out into each stillbirth is given in the table on page 22. Alterations were made in the categories used in coding the cause of each stillbirth and neo-natal death in order to make them comparable and to enable the results to be merged in the table analysing the causes of peri-natal deaths on page 18.

Year	Live Births			Stillbirths		
	Nottingham		England & Wales	Nottingham		England & Wales
	Number	Rate	Rate	Number	Rate	Rate
1947 ..	6,960	23·9	20·6	156	21·9	24·1
48 ..	5,887	19·82	17·9	141	23·3	23·2
49 ..	5,703	19·96	16·7	116	19·9	22·7
50 ..	5,363	17·47	15·8	107	19·5	22·7
51 ..	5,203	16·97	15·5	114	22·72	23·0
52 ..	5,191	16·71	15·3	120	22·58	22·7
53 ..	5,185	16·64	15·5	107	18·97	22·5
54 ..	5,001	16·05	15·2	101	19·79	23·5
55 ..	4,893	15·67	15·0	125	24·91	23·2
56 ..	5,155	16·50	15·6	125	23·67	22·9
57 ..	5,478	17·52	16·1	109	19·51	22·5
58 ..	5,577	17·82	16·4	131	22·95	21·6
59 ..	5,624	17·95	16·5	114	19·87	21·0
60 ..	5,729	18·26	17·1	115	19·68	19·8
61 ..	5,823	18·59	17·4	119	20·03	19·1
62 ..	6,182	19·67	18·0	118	18·73	18·1

Infant Mortality. In 1962 infant deaths numbered 157 resulting in an infant mortality rate of 25·39 per thousand live births. A reduction in the number of children whose death was ascribed to prematurity alone was largely responsible for the infant mortality rate being lower in 1962 than in the previous year though it was greater than that of 1960. There were 15 deaths of infants born to West Indian parents, giving a mortality rate of 35·55; more than half of these babies were illegitimate.

An analysis of the registered causes of death, obtained from the local registrars' returns, is summarised in the following table in comparison with the experience of previous years.

	Number of deaths							
Death due to	1962	1961	1960	1959	1958	1957	1956	1955
Prematurity	50	63	38	34	44	36	35	34
Congenital malformations	30	31	21	27	29	31	18	32
Birth injuries	8	6	8	15	9	13	7	10
Atelectasis	14	11	14	8	1	4	9	4
Respiratory diseases ..	27	24	25	35	27	28	21	41
Gastro intestinal infections	4	4	4	1	1	2	2	2
Other causes	24	22	23	16	12	12	21	14
	157	161	133	136	123	126	113	137

Comparison of Local and National Rates			
Year	Nottingham		England & Wales
	Number	Rate	Rate
1948 ..	261	44	33·9
49 ..	219	38	32·4
50 ..	165	31	29·6
51 ..	170	32·7	29·7
52 ..	146	28·13	27·6
53 ..	140	27·00	26·8
54 ..	122	24·35	25·4
55 ..	137	28·00	24·9
56 ..	113	21·92	23·7
57 ..	126	23·00	23·1
58 ..	123	22·05	22·6
59 ..	136	24·18	22·2
60 ..	133	23·22	21·9
61 ..	161	27·65	21·6
62 ..	157	25·39	20·7

Neo-Natal Mortality. The deaths of 100 infants occurred during the first month of life. The neo-natal mortality rate was 16·17 per thousand live births compared with 20·61 in the previous year.

The enquiry into the cause of each death was continued and the results are tabulated on page 23.

Death rates per 1,000 live births		
Year	Under 4 weeks	From 4 weeks to 1 year
1951 ..	19·80	12·9
52 ..	17·91	10·22
53 ..	16·39	10·61
54 ..	14·80	9·55
55 ..	16·76	11·24
56 ..	15·13	6·79
57 ..	15·15	7·85
58 ..	15·42	6·63
59 ..	17·25	6·93
60 ..	15·36	7·86
61 ..	20·61	7·04
62 ..	16·17	9·22

The following table compares the mortality rates for the principal causes of death in this period, viz. prematurity and congenital malformations, with those experienced in previous years. The figures were calculated from the results of the neo-natal death enquiry.

NEO-NATAL MORTALITY RATES

Cause of Death	1962	1961	1960	1959	1958	1957
Prematurity	7·9	9·0	6·8	6·0	7·2	5·3
Congenital malformations ..	2·9	4·9	1·9	5·1	3·7	3·4
Other causes	5·3	6·3	6·3	5·7	4·3	6·6

Early Neo-Natal Mortality. In the first week of life, 88 infants died giving a rate of 14·23 per 1,000 live births.

The trend of various mortality rates over the last fifteen years is shown in the next table.

MORTALITY RATES				
	Stillbirth	Infant	Neo-natal	Early Neo-natal
1948-52	21·64	35·14	18·47	14·81
1953-57	21·58	24·81	15·64	12·87
1958-62	20·22	24·54	16·97	13·65

Peri-Natal Mortality. The number of peri-natal deaths totalled 206 giving a rate of 32·69 per 1,000 live and stillbirths.

The enquiry into the cause of each stillbirth and neo-natal death has been carried out for the last eight years. The results of the investigation into the causes of the peri-natal deaths which occurred during the last year are tabulated below, and mortality rates from certain causes for the periods 1955-58 and 1959-62 are given.

Primary factors in causation	Deaths	
	Total	Premature infants
Ante-natal causes:		
Toxaemia including haemorrhage ..	18	14
A.P.H. without toxaemia	18	16
Rh. incompatibility	5	2
Intra-natal causes:		
Injury	12	5
Asphyxia	15	2
Other	14	2
Post-natal causes:		
Infection only	3	2
Congenital malformation	40	30
Prematurity only	36	36
Other causes	45	26
All causes	206	135

PERI-NATAL MORTALITY RATES

Cause of Death	1959-62	1955-58
Prematurity	9.32	10.42
Congenital malformations ..	6.00	6.21
Birth hazard	5.66	5.23
Maternal toxæmia	3.10	4.77
A.P.H. without toxæmia ..	2.52	1.90
Other causes	6.08	6.81

Illegitimate Births. A further increase occurred in the illegitimacy rate. There were 713 illegitimate live births which formed 11.53% of all live births. Of the 422 live births to West Indian parents 25.12% were illegitimate. The proportion of all live births which were illegitimate is given for Nottingham and England and Wales in the following table.

Year	Illegitimate Live births		
	Nottingham		England & Wales
	Number	% of total	% of total
1949 ..	442	7.8	5.1
50 ..	386	7.2	5.1
51 ..	342	6.7	4.8
52 ..	382	7.4	4.8
53 ..	366	7.1	4.7
54 ..	375	7.5	4.7
55 ..	354	7.2	4.7
56 ..	384	7.4	4.8
57 ..	457	8.3	4.8
58 ..	514	9.2	4.9
59 ..	547	9.7	5.1
60 ..	524	9.1	5.4
61 ..	646	11.09	5.9
62 ..	713	11.53	N.A.

The small numbers of deaths—21 illegitimate infants died in the first year of life—has resulted in wide fluctuations in mortality rates for this group from year to year. In 1962 the rate was 29·45 compared with 24·86 for legitimate children, and in 1961 the corresponding figures were 38·70 and 26·27.

Prematurity. The incidence of prematurity showed little variation from previous years and in 1962 amounted to 8·56% of all live births. In babies born to immigrant parents the figure was 11·75%.

There were 529 premature babies of whom 71 died during the first month and 88 during the first year of life. In addition there were 69 stillbirths which weighed 5½ lbs. or less.

The neo-natal mortality rate per 1,000 premature babies was 134·22 compared with 5·13 for mature infants. The death rate of premature infants aged 4 weeks to 1 year was 32·13 per thousand premature births and of mature infants 7·07 per thousand mature births.

The percentage of babies in each of the weight groups given in the following table fluctuates from year to year. A comparison of the average weight distribution for the two periods 1953-57 and 1958-62 showed that a small increase occurred in those weighing 3 lb. 4 oz. or less and in those who were more than 4 lb. 15 ozs. at birth. The average neo-natal mortality rate of premature babies, which was 126·7 per thousand premature births during the five years 1953-57 increased to 132·3 in the second period 1958-62.

Neo-Natal Mortality of Premature Babies

Birth weight	Born at home							Born in hospitals and nursing homes		
	No. born	Transferred to hospital			Nursed at home			No. born	No. died	%
		No.	Died	%	No.	Died	%			
Up to & incl. 3 lb. 4 oz...	9	7	3	42.9	2	1	50	53	35	66.04
3 lb. 5 oz.—										
4 lb. 6 oz.	20	16	3	18.75	4	0	0	66	10	15.66
4 lb. 7 oz.—										
4 lb. 15 oz.	29	7	1	14.28	22	0	0	54	3	5.55
5 lb. 0 oz.—										
5 lb. 8 oz.	128	11	1	9.1	117	3	2.56	170	11	6.47
TOTALS ..	186	41	8	19.5	145	4	2.76	343	59	17.20

Maternal Deaths. There were five deaths of mothers who were City residents. The maternal mortality rate was 0.79 per 1,000 total births.

The cause of death in each case was certified as follows:—

- Acute myocardial failure
 - Acute bilateral bronchopneumonia

aged 23 years

II Sonne dysentery
Anaemia associated with pregnancy
Epilepsy

Post mortem examination.
- I Shock and haemorrhage following and due to abortion

aged 44 years

Post mortem examination and inquest
- Pulmonary air embolism
 - Instrumental abortion

aged 35 years

Post mortem examination and inquest
- Obstetric shock
 - Abortion

aged 34 years

Post mortem examination and inquest.
- Haemoglobin sickle cell disease
 - Pregnancy

aged 34 years

Post mortem examination.

ANALYSIS OF STILLBIRTHS

	Total	Born at			Legitimate	Sex		Premature	Maceration	Place in family					Age of mother						
		Hospital	Home	Nursing Home		M.	F.			1	2	3	4	5 or over	15-19	20-24	25-29	30-34	35-39	40-44	45-49
Ante-natal causes:																					
(a) Toxaemia ..	15	13	2	—	13	7	8	11	8	5	3	4	2	1	—	4	4	2	4	1	—
(b) *A.P.H.; no toxæmia	13	13	—	—	10	8	5	11	—	2	3	4	2	2	—	4	4	2	2	1	—
(c) Rhesus incompatibility ..	4	3	1	—	3	3	1	2	1	—	—	1	—	3	—	1	—	2	1	—	—
Intra-natal causes:																					
(a) Injury ..	5	4	1	—	4	2	3	2	—	2	1	1	—	2	—	—	2	2	1	—	—
(b) Asphyxia ..	4	4	—	—	3	1	3	—	—	2	—	—	1	1	1	2	—	—	—	1	—
(c) Other ..	14	11	3	—	14	7	7	2	4	4	7	2	—	1	2	1	5	1	5	—	—
Prematurity only ..	2	2	—	—	2	1	1	2	1	2	—	—	—	—	—	1	—	1	—	—	—
Congenital malformation	24	19	5	—	24	9	15	20	10	5	5	7	4	3	—	8	4	7	5	—	—
Other causes ..	37	22	15	—	32	22	15	20	25	5	9	9	6	8	—	13	6	8	5	5	—
TOTAL ..	118	91	27	—	105	60	58	70	49	26	28	28	15	21	3	34	25	25	23	8	—

* Ante-partum hæmorrhage.

ANALYSIS OF NEO-NATAL DEATHS

	Total	Born at			Legitimate	Sex		Premature	Age at death				Place in family					Age of mother						
		Hospital	Home	Nursing Home		M.	F.		0-23 hrs.	24-47 hrs.	2-6 days	7-27 days	1	2	3	4	5 or over	15-19	20-24	25-29	30-34	35-39	40-44	45-49
Ante-natal causes:																								
(a) Toxaemia ..	3	3	—	—	3	1	2	3	—	—	—	1	—	2	—	—	—	1	—	1	1	—	—	
(b) *A.P.H. ; no toxaemia ..	6	6	—	—	6	5	1	5	1	—	1	1	1	1	—	2	—	2	1	2	1	—	—	
(c) Rhesus incompatibility ..	2	2	—	—	2	—	2	—	1	—	1	—	—	2	—	—	—	—	1	1	—	—	—	
Intra-natal causes:																								
(a) Injury ..	7	4	2	1	7	4	3	3	2	3	—	2	2	1	—	2	—	2	2	1	1	1	—	
(b) Asphyxia ..	11	6	5	—	11	10	1	2	1	2	—	2	3	2	—	4	—	7	2	2	—	—	—	
(c) Other ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Prematurity only ..	35	26	9	—	27	24	11	35	21	6	7	1	12	5	7	6	5	3	11	9	5	2	5	—
Congenital malformation ..	22	15	7	—	20	14	8	14	7	—	9	6	6	4	6	3	3	2	7	4	5	4	—	—
Infection:																								
(a) Respiratory ..	4	3	1	—	4	3	1	2	—	—	3	1	2	—	—	2	—	—	1	3	—	—	—	—
(b) Gastro-intestinal ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
(c) Other ..	2	1	1	—	2	2	—	—	—	—	—	2	1	1	—	—	1	1	—	—	—	—	—	
Other causes ..	8	8	—	—	6	6	2	6	2	—	—	2	2	2	2	1	1	1	3	2	1	—	—	
TOTAL ..	100	74	25	1	88	69	31	70	52	12	24	12	29	18	23	11	19	7	33	25	19	10	6	—

*Ante-partum haemorrhage.

MIDWIFERY SERVICE

The domiciliary midwives attended 3,323, or 53.7% of the total, confinements of City mothers; this was an increase of 465 over the number attended last year; also they attended 10 mothers from the County who were delivered in the City.

In addition they continued the nursing, on their return home after confinement, of 388 mothers who had been booked initially, but who were admitted to hospital because of abnormality; they also nursed 443 mothers who were booked for hospital confinement only and who were discharged home early.

Midwives' clinics were held weekly at 8 centres and there were 11,490 attendances at 454 sessions, the average attendance being 25; in October similar weekly clinics were opened in Aspley and in Bulwell.

Midwives continued to attend at the surgeries of five general practitioners; the shortage of staff, however, prevented an extension of this service, despite requests to do so.

VISITS BY MIDWIVES

Ante-natal	19,209
Post-natal	47,904
Special	8,643
Social emergency investigations ..	772

Maternity Medical Services. More general practitioners were booked by mothers, and there was an increase of 3.6% in the number of confinements at which the general practitioner was present.

Year	Total home confinements	Confinements			
		Doctors booked		Doctors present	
		No.	% total	No.	% total
1951	2,493	809	32·8	331	13·2
52	2,534	996	39·3	307	12·1
53	2,680	1,251	46·7	363	13·5
54	2,541	1,355	53·3	352	13·9
55	2,521	1,478	58·6	323	12·8
56	2,646	1,705	64·4	292	11·0
57	2,844	1,972	69·2	308	10·8
58	2,863	2,088	72·9	274	9·6
59	2,933	2,105	71·8	247	8·4
60	2,876	2,237	77·7	214	7·4
61	2,858	2,323	81·3	298	10·4
62	3,323	2,755	82·9	399	14·0

Medical Aid. The number of calls made to doctors totalled 1,765, of which 393, or 22·3%, were made under the Emergency Medical Aid Service, the remainder being to their own booked cases. The main reasons for the calls continued to be rupture of the perineum, prolonged labour and pre-eclamptic toxæmia. Primary suture of the perineum followed 7·5% of the total number of home confinements, while 66·1% of patients with tears had been sutured previously. An analysis of medical aid calls is given on pages 33 and 34.

Eye Conditions. The incidence of ophthalmia neonatorum showed a slight decrease, five cases being notified; none of these was gonococcal in origin.

Maternity Emergency Service. The number of calls for the Obstetric Unit from the City Hospital fell by five, due mainly to a decrease in the number of cases of post-partum hæmorrhage; an analysis of the calls is shown in the following table:

USE OF OBSTETRIC UNIT					1962	1961	1960
Post partum haemorrhage, primary					10	19	11
" " " secondary					—	—	1
" " " with shock					1	3	3
Retained placenta					14	16	19
" " and post partum haemorrhage ..					7	3	4
" " and delay in second stage ..					—	—	—
Uterine inertia					1	—	—
Severe anaemia					—	—	—
Prolapsed cord					—	—	—
Ante partum haemorrhage					5	2	3
Malpresentation					1	—	—
Foetal distress					1	3	—
Obstetric shock					1	—	2
Asphyxiated baby					—	—	1
Eclampsia					—	—	2
Abortion					—	—	1
TOTALS					41	46	47

Hospital Admissions. There were 35 emergency admissions to hospital at the midwives' request, a decrease of 12 compared with last year.

Hospital Confinements. Arrangements were made for 410 mothers to be delivered in hospital, because of unsatisfactory home conditions, from a total of 763 applications. Of the applicants, 39·6% were West Indian, some of whom were in an advanced state of pregnancy on arrival in this country. The number of immigrants accepted for hospital confinement on social grounds was approximately double that of last year and represented two thirds of the total. An analysis is given of the homeland of the applicants.

Country of origin	Number of applicants				
	1962	1961	1960	1959	1958
British Isles	407	406	444	412	476
West Indies	302	260	223	161	229
India and Pakistan ..	42	40	31	22	27
Others	12	25	26	20	27

Analgesia. Pethidine was administered to 1,225 as compared with 977 mothers last year, an increase from 34% to 36·9% of home confinements. It was combined with gas and air analgesia in 581 cases, with trichloroethylene in 402 and with both in 2 cases.

Inhalation analgesia was used in 2,282 or 68·4% of domiciliary confinements. Gas and air was administered to 1,328 mothers, trichloroethylene to 949 and both to 5.

Oxygen. Each midwife carried a “Sparklet” apparatus; oxygen was administered to 24 babies by inhalation.

Transport. Allowances were made to 40 midwives who used their own cars in the course of their duty; two motor scooters and seven cycles were also in use.

The light car service ceased on 1st March and was replaced by an arrangement with four taxi firms, two accepting calls from midnight to 7.00 a.m. and the other two throughout the remainder of the day. These were used, as was the light car service, to convey midwives who could not drive to and from deliveries, and for nursings in exceptional circumstances.

Central Telephone Service. A central telephone service for night calls was introduced on 1st October, operated by the Ambulance Service Headquarters, and covered all calls for a midwife between the hours of 6.00 p.m. and 8.00 a.m. A list of midwives on duty each night was supplied daily to the Ambulance Service and any midwife who had been disturbed on two consecutive nights between midnight and 6.00 a.m. was omitted from the list for the following night. It was found that patients could obtain a midwife without delay, that midwives were not disturbed when off duty and that general practitioners were not disturbed by patients seeking the help of a midwife.

Relief Arrangements. The City was divided into four areas and within them midwives worked in pairs, one of each pair normally being on duty. Off-duty time was divided into 13 four weekly periods, and during each of those periods each midwife received one four-day weekend, preceded by an evening, one day off duty during each of three weeks, preceded by an evening, and one half-day from 2.00 p.m. until 8.00 a.m. the following morning during two weekends; in addition they received one extra night every four weeks, making a total of 14 nights off duty out of 28. Every effort was made to avoid altering these times.

X-Ray Examination. Arrangements for large film chest X-ray of expectant mothers were made at their first visit to ante-natal clinics; 1,190 were examined and there were 453 defaulters.

Blood Examinations. The number of these examinations continued to increase. They reflected the number of mothers attending the City's ante-natal clinics and who were booked for home confinement, as well as those referred by family doctors for blood examination only and those accepted for hospital confinement on social grounds.

A total of 2,773 first and 1,724 repeat specimens were taken for haemoglobin examination, which included 1,568 first and 564 repeat samples taken from mothers referred by general practitioners.

Blood was sent for grouping and rhesus typing from 945 new cases, including 509 referred by family doctors, and a total of 589 repeat samples were examined for the presence of abnormal anti-bodies, including 252 sent by general practitioners. In addition 906 blood films were examined.

Midwives took samples from mother and baby on 257 occasions at the request of the Regional Blood Transfusion Laboratory. The Laboratory also requested samples from 7 mothers belonging to the Negro races, who were known to possess certain red cell antigens, in order to establish a bank for testing for the presence of anti-bodies found in these races and not in those of Caucasian origin.

Of a total of 2,031 Kahn tests performed 29 were positive, an increase of 20 over last year.

Relaxation and Mothercraft. As formerly, these classes were held weekly at 6 centres and were designed primarily for mothers expecting to be confined at home, the hospitals making provision for their patients.

Altogether 960 mothers attended a total of 407 sessions, the average attendance being 7·4 as compared with 7·9 last year.

Consultant Clinic. There was an increase in the number of expectant mothers referred by medical officers to this weekly clinic at Edwards Lane Welfare Centre; 509 attended during the ante-natal period, 11 in the post-natal period, and there were 392 return visits.

Home Care of Premature Babies. Of 11 midwives trained for this work, 4 carried out these special duties, nursing 132 premature and special care babies; owing to the shortage of midwives they also assisted in the nursing of home confinements. Since March, and for the same reason, health visitors assisted with the nursing of 139 premature babies after discharge from hospital.

CARE OF PREMATURE BABIES

	1962	1961	1960
Premature babies born at home	186	137	130
Subsequently removed to hospital	41	28	29
Discharged from hospital for domiciliary care ..	254	273	203
Visits paid during the year	4,926	5,355	5,592

Staff. The staff consisted of 2 supervisors, 40 full time midwives and 10 employed part-time for nursing only; 5 full time and 1 part-time midwives left, 2 retired and 3 full time and 6 part-time midwives joined the staff. Though more part-time midwives were recruited, the number of full time midwives remained below the recommended number of 58.

There was an increase in the work load on midwives without a pupil, due partly to the national award in January of an increase in annual holiday of one week, and, in part, to an increase in sickness among the midwives; 1,093 days were lost as compared with 800 last year, the equivalent of the work of 5 midwives.

Training. Statutory refresher courses were attended by nine midwives; eight were trained in the teaching of relaxation to mothers.

The Assistant Non-Medical Supervisor attended a course on “Community Health Administration” at the William Rathbone College, Liverpool, from 10th January to 10th April.

Two midwives undertaking the care of premature babies spent two weeks each at the premature baby unit at the City Hospital.

University College Hospital, London, sent four medical students to Nottingham for training in domiciliary midwifery; they attended thirteen confinements out of twenty seven calls. As in former years they lodged at the City Hospital and at the Women’s Hospital.

Midwifery Training. In association with the Firs Maternity Hospital, twenty four places were provided for district training of pupil midwives for Part II of the Certificate of the Central Midwives Board. Pupils were provided with out-door uniform by the Hospital Management Committee, who also made arrangements for them to be taken to and from deliveries by taxi; in addition, allowances were paid to one pupil who drove her own car and two who used mopeds.

CONFINEMENTS IN THE CITY

PLACE	NOTTINGHAM mothers			OTHERS			TOTALS
	Total	Live	Stillborn	Total	Live	Stillborn	
At home—							
Conducted by midwife	3,323	3,295	28	10	10	—	3,333
“ “ in private practice	11	11	—	—	—	—	11
	3,334	3,306	28	10	10	—	3,344
Hospitals—City	1,801	1,734	67	441	415	26	2,242
Firs	483	477	6	395	393	2	878
Women’s	284	273	11	1,356	1,307	49	1,640
“ St. Mary’s Annexe ..	24	24	—	102	102	—	126
General	1	—	1	—	—	—	1
Highbury	209	207	2	926	905	21	1,135
Mapperley	—	—	—	1	1	—	1
	2,802	2,715	87	3,221	3,123	98	6,023
Nursing Home—St. Idloes	53	53	—	41	41	—	94
Nobody in Attendance	—	—	—	1	1	—	1
County midwives	—	—	—	1	1	—	1
TOTALS	6,189	6,074	115	3,274	3,176	98	9,463

MULTIPLE DELIVERIES

PLACE OF CONFINEMENT	Total	Twins		Triplets	
		City	Other	City	Other
At home—conducted by midwife ..	14	13	—	1	—
Hospitals—City	67	40	27	—	—
Firs	10	4	6	—	—
Women's	46	8	36	—	2
Highbury	18	2	15	1	—
TOTALS	155	67	84	2	2

TOTAL MEDICAL AID CALLS TO DOCTORS

Mothers	1962		1961		1960	
	No.	% of home confinements	No.	% of home confinements	No.	% of home confinements
Ruptured perineum	732	21·90	699	24·46	581	20·10
Pyrexia ..	53	1·58	46	1·61	61	2·11
Abnormal presentation ..	60	1·79	68	2·40	60	2·08
Prolonged labour	120	3·59	93	3·25	103	3·57
Ante-partum haemorrhage ..	57	1·70	87	3·04	69	2·39
Post-partum haemorrhage ..	42	1·26	52	1·82	47	1·63
Retained placenta ..	32	0·95	29	1·01	32	1·11
Obstetric shock ..	5	0·15	2	0·07	4	0·14
Abortion and miscarriage ..	21	0·63	26	0·91	21	0·73
Phlebitis	21	0·63	24	0·84	22	0·76
Premature labour	66	1·97	57	1·99	58	2·01
Pre-eclamptic toxæmia ..	77	2·30	101	3·53	70	2·42
Hypertension ..	13	0·39	24	0·84	15	0·52
Breast conditions ..	20	0·60	29	1·01	27	0·93
Urinary conditions	6	0·18	11	0·38	11	0·38
Foetal distress ..	71	2·12	73	2·56	62	2·15
Premature rupture of membranes ..	58	1·74	53	1·85	29	1·00
Anaemia ..	26	0·78	8	0·28	7	0·24
Post maturity ..	18	0·54	13	0·46	★	★
Other conditions ..	65	1·94	77	2·69	85	2·95
Total ..	1,563	46·74	1,572	55·00	1,364	47·28

★ Previously included in "other conditions".

TOTAL MEDICAL AID CALLS TO DOCTORS

Infants	1962		1961		1960	
	No.	% of home confinements	No.	% of home confinements	No.	% of home confinements
Prematurity ..	13	0.39	8	0.28	13	0.45
Stillbirths ..	19	0.57	1	0.03	1	0.03
Asphyxia and Cyanosis ..	27	0.81	23	0.80	17	0.59
Jaundice ..	1	0.03	8	0.28	7	0.24
Deformity ..	22	0.66	14	0.49	9	0.31
Skin conditions ..	6	0.18	6	0.21	12	0.42
Eye discharges ..	75	2.24	82	2.88	163	5.65
Respiratory disorders ..	15	0.45	17	0.59	16	0.55
Alimentary conditions ..	10	0.30	8	0.28	4	0.14
Other conditions ..	14	0.42	27	0.94	32	1.11
Total ..	202	6.05	194	6.78	274	9.49

ADMISSIONS TO CITY HOSPITAL DIRECT FROM CITY MIDWIVES

Mothers				1962	1961	1960	1959	1958
Retained placenta .. ..	..	..	..	—	—	—	1	5
Premature labour .. ..	..	..	..	11	9	13	9	5
Ante-partum haemorrhage ..	..	..	..	8	6	10	10	7
Post-partum .. ..	..	..	..	—	3	2	1	4
Threatened abortion .. ..	..	..	..	3	2	2	—	—
Toxaemia .. ..	..	..	..	—	3	3	2	—
Prolonged labour .. ..	..	..	..	3	4	5	1	—
Malpresentation .. ..	..	..	..	3	6	5	2	3
Unbooked social emergency ..	..	..	..	3	2	1	—	—
Hypertension .. ..	..	..	..	—	1	—	—	3
Foetal distress .. ..	..	..	..	—	—	2	—	—
Other conditions .. ..	..	..	..	4	8	2	—	6
Premature rupture of membranes ..	..	..	..	—	3	7	—	—
				35	47	52	26	33
Infants								
Prematurity .. ..	..	..	..	—	2	1	4	—

PUERPERAL PYREXIA

Cases Notified	Arising in		Arising at home		Age Groups				
			Nursed at home	Admitted to hospital					
	Hospital	Home			15—19	20—24	25—34	35— 39	40+
20	12	8	8	—	4	7	6	2	1

Midwives' notifications to Local Supervising Authority

	1962	1961	1960	1959	1958
Notifying liability to become a source of infection ..	21	30	70	99	95
„ death of infants— ..	6	9	2	10	5
„ stillbirths— ..	29	13	14	15	22
„ intention to practise ..	167	168	163	139	143

Distribution of practising midwives at end of year:

Domiciliary service ..	52
City Hospital	35
Firs Maternity Hospital ..	11
Women's Hospital ..	25
Highbury „ ..	7
Nursing homes and Nursing co-operations ..	4
Private practice	1

 135

Ceasing to practise in this area 32

HEALTH VISITING

Centenary of Health Visiting. The year 1962 marked the hundredth anniversary of the health visiting movement which was begun by a body known as "The Ladies' Sanitary Reform Association of Manchester and Salford". To commemorate this Centenary a display depicting the present day training and duties of a health visitor was exhibited in August in the windows of the Welfare Foods Distribution Centre at Canning Circus and a City centre bank.

In this city, two "lady health visitors", who had been employed by the Ladies' Sanitary Association of Nottingham on behalf of the Corporation in 1902, were appointed to the staff of the Health Department in the following year.

Dr. Philip Boobyer, Medical Officer of Health at that time, had pressed for these appointments for some years, and had detailed the duties which they were to carry out in a special report on the staffing of the department from which the following passage is extracted.

"..... it has become increasingly apparent of late that a strong moral obligation devolves upon the local authority to assist and instruct the poorer sections of the community (1) in the feeding and care of infants, (2) in dealing with cases of minor infectious disease to which medical men are not called in, and (3) in the general management of their houses and households from a sanitary standpoint. I need only indicate the high mortality of infants—and especially the hand-fed infants of the poor—from diarrhoea, and the excessive prevalence of tuberculous diseases, to illustrate the truth of this statement. Work of this kind can be most fitly undertaken by ladies, and many ladies have qualified, and are now qualifying themselves, for it by special study".

In the first year in which the “lady health visitors” worked with the Department the birth rate was 27·8, the lowest rate recorded in Nottingham until that time, and the infant mortality rate was 159.

Staff. Four health visitors who completed their course of training here joined the staff during the year. There were, however, six resignations and three married health visitors became part-time so that the number of staff was reduced to thirty-two full-time and five part-time health visitors. The number of working days lost due to sickness, 238, was equivalent to the absence of one full-time health visitor for a year.

Clinic nurses continued to assist the health visitors at welfare centre sessions and eight part-time nurses were employed in this way.

The Health Visiting and Social Work (Training) Act 1962 came into operation on 1st October, and it is recorded with pleasure that Miss D. T. Hogg, Health Visitor Tutor, was appointed a member of the newly formed Council for the training of Health Visitors.

Home Visits. Despite the reduction in the number of staff more home visits were carried out than in the previous year. Health visitors also undertook follow-up visits to 139 premature babies discharged from hospital, to release midwives who normally carry out this work for other midwifery duties.

The visiting of older people is described on page 82.

HOME VISITS

VISITS IN CONNECTION WITH	1962	1961	1960	1959	1958	1957
Pre-school children:						
Primary visits ..	6,007	5,665	5,500	5,346	5,398	5,332
Revisits under 1 year ..	42,070	37,122	36,529	35,081	35,287	34,237
,, 1-5 years ..	62,608	58,144	55,275	53,998	53,085	48,969
Old people:						
Primary visits ..	498	493	567	474	532	565
Revisits ..	4,418	4,078	4,332	4,299	4,107	3,568
Expectant mothers:						
Primary visits ..	411	356	476	419	440	350
Revisits ..	669	314	476	357	391	320
Vaccination and immunisation ..	156	209	484	61	131	178
Diabetic ..	96	106	103	57	97	99
Housing ..	72	63	45	94	120	135
Hospital after-care ..	49	74	78	175	105	163
Eye conditions ..	19	5	13	39	74	129
B.C.G. vaccination ..	13	7	4	4	378	963
Infectious disease ..	7	6	2	4	32	115
Neo-natal enquiry ..	2	16	13	23	20	34
Stillbirth ..	—	7	45	61	64	43
Other ..	754	584	312	638	363	582
NUMBER OF HOME VISITS ..	117,849	107,249	104,254	101,130	100,624	95,782
“NO ACCESS” VISITS ..	24,014	22,550	19,669	18,463	15,575	14,278
TOTAL VISITS ..	141,863	129,799	123,923	119,593	116,199	110,060

Ascertainment of Deafness in Pre-school Children.

Screening tests of hearing were carried out on babies at nine months of age, particularly those in the “at risk” groups, and on other pre-school children suspected of deafness. The tests were applied to children attending infant and toddler clinics and to others in their homes.

The arrangement whereby children failing three successive tests were referred to a consultant ear, nose and throat surgeon

continued and those found to require further assessment or training were referred to the audiology clinic administered by the Nottinghamshire County Council.

The number of children tested in 1962 was 1,904, an increase of 117% over the previous year. Four children were referred for examination, of whom one was found to have satisfactory hearing and the remaining three were still under investigation at the end of the year. In addition, two deaf children, referred by their family doctors to hospital for examination, commenced attendance at the audiology clinic.

Welfare Centre	1st Tests	Retests	Total	
			1962	1961
Aspley ..	111	3	114	54
Basford ..	142	3	145	134
Bilborough ..	237	11	248	121
Bulwell ..	65	2	67	33
Clifton Farnboro' Rd.	26	—	26	—
Edwards Lane ..	197	12	209	88
Ernest Purser ..	203	11	214	127
Hyson Green ..	240	6	246	71
Jarvis Avenue ..	—	—	—	17
John Ryle ..	125	8	133	16
Radford ..	205	2	207	80
Sherwood Rise ..	148	3	151	45
Sneinton ..	143	9	152	103
Wollaton ..	62	—	62	6
TOTAL ..	1,904	70	1,974	895

Tests for Phenylketonuria. Routine testing of infants for the presence of phenylketonuria was commenced at the welfare centres in December and the health visitors carried phenistix test strips to test non-attenders in their homes. This test was carried out on all who attended the training centre for the mentally subnormal but no cases of phenylketonuria were detected.

Co-operation with General Practitioners and with Hospitals. The continued co-operation between health visitors and general practitioners was encouraged particularly in the fields of child health and the care of the elderly.

Attendance at the diabetic clinics of the City and General Hospitals and any necessary home visiting of the patients was taken over in November by two health visitors who had not carried out this work previously, in order to spread experience among members of the staff. The consultant physicians concerned expressed their appreciation of the work carried out by the health visitors in these clinics.

Co-operation with other hospital departments in the after-care of mothers attending the post-natal clinic and elderly patients discharged from hospital continued.

Transport. Essential user car allowances were paid to nine health visitors.

Refresher Courses. Seven health visitors attended courses arranged by the Health Visitors' Association and the Royal College of Nursing, at Bedford College, London; Southlands, London; Ashburne Hall, Manchester; Lady Margaret Hall, Oxford and the University College of North Wales, Bangor.

Health Visitors' Training Course. The course, as for the previous nine years, was administered jointly by the City and County of Nottingham. At the end of the course in July all eleven students obtained the Health Visitor's Certificate.

The thirteen students accepted for the 1962/63 course included three from the City, four from Nottinghamshire and six from other authorities.

Visitors to the Department. A number of opportunities occurred to demonstrate the welfare centres and the work of the health visitors to students of training courses for other branches of the health and welfare services. In addition to home nurses studying for the Queen's Roll examination, visits to the Department were made by students from the Department of Social Science of the University and the Child Care Officers' course, student nurses from the General and City Hospitals, welfare assistants undergoing in-service training and a member of a Manchester University course in hospital administration.

Welfare Centres. There were 25 infant sessions held at the 12 centres each week and, with the exception of one, the sessions were attended by a medical officer. From 20th November an additional infant clinic was held weekly at the Holy Trinity Church Hall, Clifton, to provide facilities for mothers living at the opposite end of the estate to the John Ryle Health Centre. A medical officer attended this centre once a month to carry out immunisation procedures.

A weekly toddler clinic was commenced at the Hyson Green centre on 4th September, making a total of 11 of these sessions held each week in the City.

Of babies born in 1962, 70% attended an infant clinic and details of attendances are given in the table on page 44.

Consultant Clinics. The consultant paediatrician held a weekly session at the Ernest Purser Welfare Centre. 55 new cases attended and 152 children were seen at return visits.

Children referred by medical officers to the consultant ear, nose and throat surgeon were seen at Edwards Lane Welfare Centre where 18 children were examined.

Dental Care of mothers and children. During 1962, arrangements continued to be supervised by the Principal School Dental Officer. Treatment for children of pre-school age was made available at all of the school dental clinics. Dental treatment of mothers continued to be available at the General Dispensary, and at the Central School Clinic in Chaucer Street where dental X-ray examinations were also carried out.

No dental inspections were attempted at welfare centres or nurseries owing to the shortage of dental officers. Patients were referred by medical officers of welfare centres and by general medical practitioners.

Dental Inspection and Treatment	Mothers			Children		
	1962	1961	1960	1962	1961	1960
Number examined ..	419	497	463	344	407	422
,, needing treatment	418	497	461	326	399	410
,, treated ..	400	477	451	324	398	406
,, made dentally fit ..	351	430	398	76	109	149
1. No. of sessions ..	94	99	101	15	18	19.5
2. No. of attendances for inspection and treatment ..	1,307	1,424	1,366	382	460	475
3. Scalings and gum treatment	36	40	44	—	1	—
4. No. of fillings ..	39	32	76	—	—	4
5. Silver nitrate treatment only ..	9	3	2	—	—	—
6. No. of crowns and inlays ..	—	—	—	—	—	—
7a. No. of teeth extracted under general anaesthetic ..	2,200	2,458	2,589	866	1,148	1,125
7b. No. of teeth extracted under local anaesthetic ..	364	534	285	—	—	—
8. No. of general anaesthetics ..	488	493	533	355	446	453
9a. Dentures provided: full upper or lower ..	171	211	200	—	—	—
9b. partial upper or lower ..	66	44	44	—	—	—
10. Radiographs ..	12	17	13	—	—	—
11. Other operations ..	445	470	484	7 (Temp. teeth)	—	—

Welfare Foods. The distribution centre at Clifton Youth Club was closed on 24th May because of the difficulty experienced by the Women's Voluntary Service, by whom the centre was run, in finding helpers to carry on the work.

The decline in sales of dried milk and vitamin preparations continued and because of the small number of items distributed at the Bestwood and Sycamore Community Centres, the sale of welfare foods at these premises was discontinued on 26th July.

Welfare foods were available at all infant clinics and distribution from the central depot at Canning Circus was continued.

The amount of vitamin preparations issued in 1962 was approximately half the figure for the previous year when revised charges were introduced.

Amounts distributed	1962	1961	1960	1959	1958
National dried milk—20 oz. tins ..	75,056	80,206	93,740	107,133	110,013
Orange juice—6 oz. bottles ..	47,963	95,576	161,353	173,315	164,260
Cod liver oil—6 oz. bottles ..	6,103	11,911	17,651	18,320	18,043
Vitamin tablets—packets of 20 ..	6,960	13,615	17,651	17,608	17,860

Family Planning. Sessions were held at the Nottingham Women's Welfare Centre at the General Dispensary three times a week.

Medical officers of welfare centres referred women to the Clinic, when indicated, on medical grounds.

The table indicates the source of referral of those who attended.

Attended on own initiative	172
From general practitioner	172
From maternal and child welfare centre ..	30
From chest clinic	8
TOTAL	382

ATTENDANCES AT WELFARE CENTRES

	ANTE-NATAL AND POST-NATAL CLINICS†						INFANT CLINICS				TODDLER CLINICS			
	No. of sessions	New cases	Return visits	Post-natal visits	Total attend-ances	Average per session	No. of sessions	New cases	Attend-ances	Average per session	No. of sessions	New cases	Attend-ances	Average per session
Aspley ..	98	178	1,082	41	1,301	13.3	98	254	3,027	30.8	45	2	503	11.2
Basford ..	50	149	698	63	910	18.2	97	250	4,132	42.6	52	4	592	11.4
Bilborough ..	51	70	405	25	500	9.8	49	130	1,733	35.4	44	51	693	15.7
Bulwell ..	51	173	868	68	1,109	21.7	99	223	4,631	46.7	46	3	568	12.3
Clifton	—	—	—	—	—	—	★5	23	134	26.8	—	—	—	—
Farnborough Rd.	47	166	737	55	958	20.4	99	444	5,694	57.5	51	25	929	18.2
Edwards Lane ..	103	263	1,313	79	1,655	16.1	103	466	4,230	41.1	48	16	489	10.2
Ernest Purser ..	—	—	—	—	—	—	100	428	6,232	62.3	†16	103	183	11.4
Hyson Green ..	51	25	110	1	136	2.1	148	426	4,893	33.1	49	42	808	16.5
John Ryle H.C. ..	152	561	1,732	81	2,374	15.6	152	611	6,017	39.5	63	38	957	15.2
Radford ..	101	502	904	52	1,458	14.4	102	450	4,015	39.3	46	25	481	10.5
Sherwood Rise ..	106	380	1,570	98	2,048	19.3	152	594	5,937	39.0	50	43	691	13.8
Sneinton ..	—	—	—	—	—	—	51	142	1,940	38.0	—	—	—	—
Wollaton ..	810	2,467	9,419	563	12,449	15.4	1,255	4,441	52,615	41.9	510	352	6,794	13.3
TOTALS ..														
Consultant clinic ..	51	509	392	11	912	17.9								

†Does not include attendances for blood samples only.

† Commenced 4.9.1962.

★ Commenced 20.11.62.

DAY NURSERIES

Seven nurseries in the City provided places for 269 children; 23 for children 0-6 months old, 83 for those 6 months-2 years, and 163 for children aged 2-5 years. Children were admitted to the nurseries according to social need and during the year 325 children attended for the first time. The maximum number on the waiting list of any nursery was 15.

The following table analyses the reasons for admission.

Reason for admission	1962	1961	1960	1959	1958	1957
Parent sole bread-winner	46%	49%	47%	47%	46%	45%
Family income insufficient	23%	17%	16%	19%	6%	11%
Mother a nurse, teacher, etc.	11%	4%	5%	4%	5%	6%
Parent invalid, in prison, etc.	8%	10%	8%	4%	19%	13%
Bad housing conditions . .	6%	9%	9%	14%	10%	13%
Temporary special requests	6%	11%	15%	12%	14%	12%

Attendances. The total for the year was 47,748.

Age Groups	Average daily attendance							
	1962	1961	1960	1959	1958	1957	1956	1955
0-6 months . .	7	7	10	8	11	12	10	10
6 months-2 years	67	64	75	76	80	83	87	86
2 years-5 years . .	129	133	129	136	139	148	165	170
TOTALS . .	<u>203</u>	<u>204</u>	<u>214</u>	<u>220</u>	<u>230</u>	<u>243</u>	<u>262</u>	<u>266</u>
Percentage total places . .	75·8%	76·2%	79·1%	77·0%	72·0%	69·6%	75·1%	76·2%

Charges. The standard daily charge was increased from 7/- to 7/6d. on 25th April, but the minimum rate of 1/2d. per day remained unchanged. Intermediate charges calculated according to a scale of assessment were increased proportionately.

There were 125 applications for reduced charges, of which 119 were granted.

Infectious Diseases. The number of cases of the common infectious diseases was small though a single outbreak of dysentery involved six cases in one nursery.

Infectious Disease	Number of cases						
	1962	1961	1960	1959	1958	1957	1956
Measles ..	24	54	43	48	62	60	—
Sonne dysentery	6	4	51	30	15	14	84
Chicken pox ..	27	7	15	2	1	28	12
Mumps ..	—	—	1	10	—	11	12
Whooping cough	1	—	1	—	—	—	6
German measles	2	9	—	—	2	22	45
Scarlet fever ..	1	1	1	—	3	—	1
Poliomyelitis ..	—	—	—	—	—	—	1
Gastro-enteritis ..	—	—	—	—	12	—	—
Tuberculosis ..	—	—	—	—	1	—	—

Staff. In the early part of the year the nurseries were fully staffed but, as in previous years, vacancies which proved impossible to fill occurred during the six months prior to the end of the training course in September.

In order to relieve the strain on the remaining staff by shortages of long duration, three temporary staff with experience of children were employed until the vacancies were filled by newly qualified nursery nurses.

Training Centre. The Centre is administered by the Education Committee and student nursery nurses attended on two days each week. The remaining three days were spent in nursery schools and classes or one of the five training nurseries which provided places for thirteen first year and ten second year students.

The certificate of the Nursery Nurses Examination Board was gained by 45 candidates out of the 46 who took the examination in July.

NURSERIES AND CHILD MINDERS (REGULATION) ACT, 1948

An application, which was under consideration at the end of 1961, was not proceeded with as the premises required considerable adaptation to make them suitable for use as a nursery. One day nursery, situated at the City Hospital for the care of children of part-time nursing staff, was registered, making a total of three private nurseries in the City with places for 93 children.

An application for registration as a child minder in respect of five children was granted. Two daily minders, who also had foster children in their care, were not obliged to register as Section 9 (2) of the Act applied.

At the end of the year there were three registered child minders in the City caring for eleven children.

ATTENDANCES AT CITY DAY NURSERIES

	BULWELL			DOWSON			HEATHCOAT STREET			PIERREPONT			95 QUEEN'S DRIVE			RADFORD			SYCAMORE ROAD		
	A	B	C	A	B	C	A	B	C	A	B	C	A	B	C	A	B	C	A	B	C
JANUARY ..	—	131	385	—	105	419	19	280	278	9	138	484	61	209	149	5	157	439	—	250	396
FEBRUARY ..	—	179	428	—	114	472	44	252	293	—	133	501	39	263	120	10	153	505	—	220	358
MARCH ..	6	163	435	—	160	518	67	289	293	5	159	549	32	310	170	15	147	518	—	248	408
APRIL ..	4	85	161	—	166	369	55	225	242	16	119	434	18	234	179	5	105	407	—	213	372
MAY ..	31	228	367	—	207	471	92	335	328	34	186	496	5	306	245	46	176	601	—	247	491
JUNE ..	31	162	325	—	156	429	35	273	259	25	156	474	10	264	154	12	127	371	—	192	394
JULY ..	20	189	414	—	154	435	15	355	324	16	148	583	62	329	153	42	199	493	9	184	364
AUGUST ..	5	78	184	—	69	135	6	136	129	16	43	261	25	113	46	19	80	225	8	85	165
SEPTEMBER ..	23	169	403	—	113	392	23	320	266	39	87	543	74	229	176	29	208	505	19	228	398
OCTOBER ..	3	209	457	—	99	383	60	338	331	35	117	644	75	313	178	18	213	583	27	272	502
NOVEMBER ..	7	144	510	—	124	473	86	326	310	27	105	445	60	308	182	37	186	581	31	249	439
DECEMBER ..	15	107	342	—	87	329	22	204	208	—	80	346	23	187	112	29	124	345	30	157	314
TOTALS ..	145	1,844	4,411	—	1,554	4,825	524	3,333	3,261	222	1,471	5,760	484	3,065	1,864	267	1,875	5,573	124	2,545	4,601
	6,400			6,379			7,118			7,453			5,413			7,715			7,270		

Age Groups A: 0-6 months. B: 6 months-2 years. C: 2 years-5 years.
Total Attendances 1,766 15,687 30,295 Grand Total: 47,748.

THE CARE OF ILLEGITIMATE CHILDREN

There were 713 illegitimate live births in 1962, 11·53% of all live births. The infant mortality rate applicable to these babies was 29·45 per thousand illegitimate live births.

A number of unmarried mothers, applying for a hospital bed for confinement or seeking advice about admission to a mother and baby home were interviewed by a senior nursing officer. The 175 mothers seen for the first time during the year included 105 who were immigrants, and an analysis of their ages showed that 60 were under twenty years of age and of these, 7 were under sixteen.

Mother and Baby Home. The review of arrangements for the care of the unmarried mother and her child, commenced in 1961, was continued and, because the number of staff required was high in relation to the amount of accommodation offered, it was decided that the Mother and Baby Home at No. 8 Mapperley Road, which had been administered by the Corporation for eight years, should be closed.

Arrangements were made for the Southwell Diocesan Board of Moral Welfare to undertake moral welfare work on behalf of the Corporation and to obtain places in mother and baby homes for City mothers when necessary. Financial responsibility for these cases was accepted after any contributions towards the cost had been made by the mother, relatives and the putative father.

With the approval of the Minister of Health the City Council's proposals under Sect. 22 of the National Health Service Act were amended to incorporate the new arrangements, and the Mother and Baby Home closed on the 8th October.

During the nine months of the year prior to its closure 25 mothers were admitted to the Home, 21 of whom were resident in the City. The average occupancy over this period was 5·7 and the average length of stay of the mothers was 6½ weeks.

MOTHER AND BABY HOME

				1962	1961	1960
Mothers—in the home 1st January	..	..		8	3	5
admitted before confinement	..	..		21	38	23
admitted after confinement	..	..		4	10	4
returned home with baby	..	..		13	25	17
returned to lodgings with baby	..	..		6	6	2
married putative father	..	..	..	—	4	—
left before confinement	..	..	..	1	2	1
returned home from hospital with baby	..	..		5	6	3
who cancelled booking	..	..	..	1	9	12
Babies—admitted to Children’s Home	..	..		1	2★	1
placed for adoption	..	..	..	5	9	5★
placed in foster homes	..	..	..	2	—	—
Remaining on December 31st	..	..	..	—	8	3

★ including twins

After the decision to close the Home had been taken, mothers were referred to the moral welfare workers of the Southwell Diocesan Board. Some City mothers needing help approached the Board direct and financial responsibility for them was accepted in appropriate cases by the Corporation.

Vacancies were obtained at Grosvenor House, Mansfield, and a number of other Homes further afield, for 19 mothers. Although under the new arrangements mothers had to travel some distance from the City, many preferred to leave the neighbourhood late in pregnancy.

The following table gives the ages of mothers admitted to mother and baby homes.

AGE DISTRIBUTION

Age Group	1962	1961	1960	1959	1958
Under 15 ..	3	1	—	—	—
15 and 16 ..	7	11	6	2	1
17 and 18 ..	17	12	10	6	6
19 and 20 ..	6	11	5	5	2
Over 20 ..	11	13	6	17	10

HOME NURSING SERVICE

There was no significant change in the type or distribution of cases nursed during 1962.

The number of visits made was 207,843 compared with 217,491 in 1961, and the number of new patients was 4,372 compared with 4,605. The difference between these figures was due in part to fewer requests for pre X-ray enemas and to fewer patients with acute respiratory conditions. In addition it was possible to teach some diabetics to give injections to themselves sooner, and more elderly diabetics were stabilised on oral insulin. Previously this type of short visit constituted a larger proportion of the nurses' work.

In recent years the staff of the service have been increasingly occupied attending to those patients who required heavy and prolonged nursing and have had progressively less opportunity for supportive care and preventive visits. It would appear that this is the trend throughout the Country.

The proportion of patients of retiral age and over rose to 62% in 1962, thus repeating the 4% increase which occurred in 1961. In most cases requests for assistance for elderly persons were not made unless it appeared absolutely necessary. On the other hand the conditions found in some cases, when help was eventually requested, indicated that earlier visits would have been of value. These cases required more nursing care, and more supervision by the Assistant Superintendents, than might have been necessary had they been seen sooner. Thus it is probable that much distress and difficulty could be avoided if the staffing position made it possible to visit and bath those who required it before their condition deteriorated.

Some nurses have commented that, since most preventive visits have had to be curtailed, they have often been approached while on the district by relatives or neighbours seeking advice. Although time-consuming these enquiries are not apparent in the returns. However, when short visits were made to give injections, or to inspect equipment on loan, the opportunity to give advice was always taken.

Marie Curie Memorial Foundation. The Foundation provides immediate help to cancer patients where there may be delay in obtaining it, or where it would not be otherwise available. The main provision is in the form of nursing attendants or sitters-in for patients living alone or left on their own for part of the day.

The Foundation agreed to provide this service in Nottingham through the agency of the Home Nursing Service and it commenced on the 31st August. An initial part-time staff of six nurses and nursing auxiliaries was recruited and worked with great enthusiasm.

There was no doubt of the appreciation shown by both the relatives and the patients themselves, but in addition the time of the home nurses was saved, and they were relieved of the strain of leaving patients with insufficient attention between visits. Organisation of the service added to the administrative duties but its success made the increased work well worthwhile.

This success emphasised the need for help of this type for similarly placed non-cancer patients. Many other conditions required continuous care between visits and often this had to be given by a relative who was also elderly. A smaller number of patients lived alone and died alone. Their tragedy was not so much that they might be found dead but that they had to spend many nights with no-one to attend to their basic needs.

Nursing Equipment. Requests for equipment, of which a considerable range is available, continued to grow but could not always be met immediately. Many of these were for the larger items such as beds and commodes, and there were also requests for additional items such as special chairs for infants. There appeared to be both an increased need and also an increased awareness of the items available, of which the tripod walking aid for "stroke" patients is a typical example.

Relatives were encouraged to buy some of the smaller items such as urinals, feeding cups, and mackintosh or polythene sheeting.

Staff. There were 13 resignations and, for a short period, the number of full time nurses fell to 59, but as a result of an unexpected number of applications there were 66 on the staff at the end of the year. Absence due to holidays was at a peak when the staff was smallest and only the loyal co-operation of the nurses, many of whom worked very long hours, prevented any reduction of the service.

An assistant superintendent left in June to return to health visiting, and in November a home nurse on the staff was promoted to fill the vacancy.

Fewer days were lost due to sickness, 820 compared to 944 in 1961, and this was shared by 63 nurses. Prolonged sick leave for 9 nurses accounted for 497 of the days. Maternity leave was granted to four nurses which was the same number as in 1961.

Transport. Car allowances were paid to 4 superintendents and 31 nurses. Two of the nine Lambrettas were replaced by Tina scooters which were still on trial at the end of the year. The Lambrettas were too heavy for most of the nurses.

Training. Nine students had commenced the course in the autumn of 1961 but only eight completed it. The eight were all successful in the examination for the Queen's Roll in January; five remained on the staff, but two returned to the County and one resigned.

Twelve of the nurses appointed during the year and one independent student joined the training course which commenced in September.

The Superintendent was again invited to assist with the examination for the Ministry of Health Certificate of District Nursing at Stoke-on-Trent.

Refresher Course. Three nurses attended a course at Ashburne Hall, University of Manchester.

An Assistant Superintendent spent five days studying procedures in the Spinal Injuries Unit, Lodge Moor Hospital, Sheffield.

Conferences. Representatives from the Superintendent Staff attended the Standing Conference of Training Centre Superintendents, a conference on Long-term Illness and its Implications, and a combined conference for Ward Sisters and District Nurses. All three conferences were held in London.

A male nurse was one of the speakers at a conference held in Nottingham by the Chest and Heart Association on "Stroke Rehabilitation".

Comparative index of work over 7 years

	1962	1961	1960	1959	1958	1957	1956
Register 1st January ..	1,707	1,719	1,621	1,617	1,726	1,568	1,492
New patients ..	4,372	4,605	4,989	5,115	5,359	5,758	5,927
Total visited ..	6,079	6,324	6,610	6,732	7,085	7,326	7,419
Register 31st Dec.	1,736	1,707	1,719	1,621	1,617	1,726	1,568
Total nursing visits	207,483	217,491	224,594	222,898	234,274	246,292	240,133
Total supervisory visits	2,474	1,447	2,366	2,341	2,247	2,581	3,085
Case load—visits per month per nurse	264	279	276	278	300	317	317
Type of illness							
Cardio-vascular ..	1,271	1,261	1,229	1,340	1,426	1,368	1,181
Respiratory ..	689	860	785	830	1,279	1,445	1,384
Central nervous	864	824	900	900	963	942	937
Alimentary ..	757	801	1,041	1,117	991	976	1,042
Genito-urinary ..	336	355	401	431	401	492	483
Malignant diseases	497	506	537	473	426	447	397
Diabetes ..	277	272	275	283	309	297	278
Tuberculosis ..	159	191	210	175	211	291	326
Skin diseases ..	218	104	120	104	125	135	138
Burns, scalds, injury etc. ..	476	529	734	718	453	256	486
Senility ..	285	344	241	133	350	456	461
Infectious fevers ..	11	13	7	20	9	19	14
Rheumatism, arthritis ..	239	264	130	208	142	202	292
TOTALS ..	6,079	6,324	6,610	6,732	7,085	7,326	7,419
Age groups of Patients							
4 years and under	1·2%	1·2%	1·8%	1·7%	1·5%	2·5%	3·3%
5—14 years ..	1·3%	1·8%	2·2%	1·9%	1·9%	2·5%	2·9%
15—44 ,, ..	10·8%	13·9%	15·5%	16·1%	14·3%	18·7%	18·6%
45—64 ,, ..	24·6%	24·7%	26·1%	26·0%	27·1%	25·2%	24·2%
65 and over ..	62·1%	58·4%	54·4%	54·3%	55·2%	54·1%	51·0%

LOAN OF NURSING EQUIPMENT

Issued by Home Nursing Service

Article	1962	1961	1960	1959	1958
Air rings	248	279	271	314	352
Bed pans	886	896	851	895	847
Back rests	462	509	450	462	452
Barrier outfits ..	441	659	596	513	470
Cradles	99	96	82	74	87
Crutches	26	23	20	21	22
Draw sheets	197	196	225	234	210
Elbow crutches ..	15	—	1	—	1
Feeding cups	65	64	42	43	41
Incontinent gowns ..	32	12	32	30	13
Infectious outfits ..	6	7	9	23	18
Mackintosh sheets ..	843	809	798	849	849
Midwifery outfits ..	15	16	36	29	16
Sorbo cushions ..	478	492	437	479	360
Syringes 5cc. T.B. ..	426	649	571	478	427
Syringes 2cc.	1	8	5	2	15
Syringes others	14	14	28	13	6
Urinals	393	425	404	447	447
Walking tripods ..	24	6	4	1	3
Disposable draw sheets ..	451	—	—	—	—
„ polythene sheets	48	—	—	—	—
TOTALS	5,170	5,160	4,862	4,907	4,636

Issued from Health Service Store

Article	1962	1961	1960	1959	1958
Air beds	—	—	2	5	1
Bed tables	4	2	1	1	1
Bedsteads	62	57	42	51	51
Commodes	196	222	155	106	110
Invalid chairs	129	178	140	98	99
Mattresses	75	64	59	61	67
Spinal carriages ..	—	—	1	—	2
TOTALS	466	523	400	322	331

INFECTIOUS DISEASE CONTROL

INFECTIOUS DISEASES

The table below is compiled from notifications by general practitioners and by the Physician Superintendent of the Infectious Diseases Hospital, as well as from reports from the Director of the Public Health Laboratory.

	1962	1961	1960	1959	1958	1957	1956
Dysentery ..	50	133	261	285	514	485	1,222
Food poisoning ..	29	63	33	151	50	51	22
Paratyphoid fever	1	—	1	2	—	—	1
Typhoid fever ..	1	1	—	1	1	—	—
Measles ..	1,917	4,083	3,054	1,852	2,782	4,882	165
Pneumonia ..	99	206	152	189	222	274	144
Whooping Cough	70	115	232	206	153	247	1,024
Scarlet fever ..	69	124	198	510	481	332	241
Erysipelas ..	9	8	12	18	20	25	25
Puerp. pyrexia ..	20	33	15	31	17	35	20
Cero-spin. fever ..	4	5	4	4	9	5	8
Poliomyelitis:							
paralytic ..	—	4	3	9	4	17	13
non-paralytic ..	—	—	1	—	—	3	1
Encephalitis:							
infectious ..	—	2	1	3	—	—	—
post infective ..	1	1	8	2	5	3	—
Ophth. Neonat. ...	5	6	7	11	9	6	3

Dysentery. Notifications were received of 78 cases, but only 50 of these were confirmed bacteriologically. A further 17 excretors were found among family contacts.

In October it was decided that public health inspectors would only visit those cases in which family contacts might present a special risk, in particular food-handlers and nursing staff. General practitioners were asked to inform the Health Department of any such contacts. It was stressed at the same time that contacts with any symptoms must be considered as cases.

Food Poisoning. There were 30 confirmed cases. This total was less than half the number, 63, which occurred in 1961, but 52 of those had resulted from a single outbreak. Two cases were in each of 4 families and 3 cases in a fifth, but the remainder occurred singly.

Six symptomless excretors were discovered among the family contacts.

The causative organisms were:

S. typhimurium		S. St. Paul	..	2	
6 phage types	..	25	S. bredeney	..	1
S. unnamed	..	2			

Paratyphoid Fever. A boy of 8 years of age developed paratyphoid fever and was admitted to the Infectious Diseases Hospital. The phage type of the *S. paratyphi* B. was Beccles var. 5 which is one usually associated with desiccated coconut, but the foodstuff responsible could not be traced. His case appeared to be part of a food poisoning outbreak in his family. Three days before the onset his twin brother had a temperature, headache and abdominal discomfort, and 8 days later his father and elder sister had similar symptoms. The salmonella was isolated from the faeces of the brother and sister, and also from that of the younger sister aged 18 months, who had never been ill. A positive culture was not obtained from the father.

Typhoid Fever. *A case.* A 17 month old Jamaican girl who had been born in this Country was admitted to hospital suffering from typhoid fever. Three months later the carrier responsible, a Dominican woman, was traced. She had not been directly associated with the girl, and lived a quarter of a mile away.

The investigations were tedious both for the public health inspectors who had to make many visits, and for the Laboratory. In all, 130 faecal and 25 blood specimens were examined from 45 persons of whom 37 were West Indian, 3 Indian and 5 English. In addition bacteriological examinations were made of 22 Moore's sewer swabs, and a number of toilet swabs which were devised by the Director of the Public Health Laboratory.

The patient had been 'minded' until 2 weeks before her illness in the house next door to the one in which the carrier lived. These two houses, along with two others in multiple occupation, had outside water closets in a communal yard. At the time of the infection the sewer from the toilets of three of these houses was blocked, and the inhabitants had to share that of the fourth where the carrier lived.

The mechanism of cross-infection is not known and it is surprising that no other cases occurred. There was no serological evidence of previous infection among the other contacts.

The carrier gave a history of an undiagnosed illness of several weeks duration when she was 12 years old and living in the West Indies.

A carrier. A Jamaican man who had been discovered in 1961 to be a typhoid carrier and had been unsuccessfully treated for his condition, agreed to re-enter hospital for further treatment.

In the second course of treatment he received a total of 120 million units of penicillin intramuscularly and 30 grams of probenecid. Faecal specimens were all subsequently negative for *S. typhi*, and he was considered cured.

Whooping Cough. The number of cases was again much reduced, being 70 in 1962, compared with 115 in 1961, and 232 in 1960. Only a small proportion, 9 out of the 70, had been vaccinated.

There was one death, in a male infant aged 3 months, from bronchopneumonia which occurred as a late complication. He had contracted whooping cough at one month of age, before vaccination would have been started.

	1962	1961	1960	1959	1958	1957	1956	1955	1954
Notifications ..	70	115	232	206	153	247	1,024	566	1,104
Deaths ..	1	—	—	—	—	—	—	2	—
No. immunised ..	4,241	5,118	4,183	3,677	3,565	3,438	3,063	3,584*	—

★ First year of vaccination on a large scale.

ANALYSIS BY AGES

	M.	F.	Total
Under 1 year	6	3	9
1— 4 years	23	17	40
5— 9 „	3	15	18
10—14 „	1	—	1
15+ „	2	—	2
TOTALS	35	35	70

Measles. There were 1,917 notified cases and 33 of these were admitted to hospital. Very few occurred in the early months and at the year's end the expected biennial epidemic appeared to be in full swing.

A boy of five years of age died from staphylococcal pneumonia complicating the disease, but he had a congenital condition which was also a contributory factor.

Scarlet Fever. Notifications of this disease continued to fall, being 69 compared with 124 in 1961.

In October it was decided that notified cases would no longer be visited by public health inspectors because, apart from the falling incidence and diminishing severity of this disease, many children had recovered by the time the notification was received. For some years there has been no exclusion from school of the child contacts.

Cerebro-Spinal Fever. Four cases were confirmed, with one death of a male child of 18 months of age, which occurred shortly after admission to hospital. Two days later a 3 year old brother of this child was also admitted to hospital with meningococcal meningitis, but made a satisfactory recovery. The meningococcus was isolated from a throat swab of the father. It is unusual for multiple isolations to be made among the family contacts of a case, or for more than one case to occur in the same family.

Poliomyelitis. For the first time for 19 years no case of poliomyelitis was confirmed in the City. There was one notification but the diagnosis was amended.

The average annual case-rate was 3·5 between 1919 and 1946, but it reached 19 between 1947 and 1961, and there were 17 deaths during this second period. The peak year was 1949 with 52

cases. In the 10 years, 1952-61, out of a total of 154 cases there were 134 with varying degrees of paralysis although many of these will have made a complete recovery.

Poliomyelitis was increasing until vaccination became available in 1956, after which it declined. A year without a single case is reason for satisfaction but not complacency. Cases are still occurring in the Country, and outbreaks can occur in well vaccinated communities. It is important to maintain a high vaccination rate.

		Paralytic	Non-Paralytic	Total	Deaths
1953	..	20	9	29	2
54	..	10	—	10	—
55	..	26	6	32	1
56	..	13	1	14	—
57	..	17	3	20	—
58	..	4	—	4	1
59	..	9	—	9	1
60	..	3	1	4	—
61	..	4	—	4	—
62	..	—	—	—	—

Age Group		1962		1961		1960		1959		1958		1957		1956		1955		1954	
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
0- 4	..	—	—	2	—	1	1	3	2	—	1	7	4	3	2	1	4	1	3
5- 9	..	—	—	1	—	—	—	—	—	—	—	2	2	3	4	7	1	3	2
10-14	..	—	—	—	—	1	—	—	—	—	—	1	1	—	—	6	—	—	—
15-24	..	—	—	—	—	—	—	1	—	—	1	2	—	1	1	5	2	—	—
25+	..	—	—	1	—	1	—	2	1	2	—	—	1	—	—	4	2	1	—
TOTALS	..	—		4		4		9		4		20		14		32		10	

Encephalitis. One case of encephalitis following mumps was notified from hospital.

Smallpox. No case occurred in Nottingham as a result of the 5 importations into the Country from Pakistan. Two close contacts of cases were kept under surveillance.

Opinion on diagnosis was sought either by hospitals or by general practitioners in 9 cases of which 7 proved to be chickenpox 1 meningococcal septicaemia, and 1 chronic dermatitis.

In July a Senior Assistant Medical Officer in the Department, who had had considerable experience of the disease abroad, was designated by the Ministry of Health as a practitioner to assist Medical Officers of Health in the diagnosis of smallpox.

Gastro-Enteritis. There were 61 admissions to hospital with three deaths. Forty-four of these cases were under two years of age.

Gastro-enteritis was given in Coroners' Certificates 'E', following post mortem examinations, as the cause of death of five other children.

Venereal Disease. The number of new cases of syphilis was 75 compared with 73 in 1961 and it is recorded with some relief that the 60% increase in 1961 was not repeated in 1962. There were 3 early and 72 late cases. All the early cases and 38 late ones occurred in males and of the 34 cases in females, 25 were diagnosed during pregnancy.

Gonorrhoea showed an increase of 7% on 1961. There was a total of 523 cases of which 400 occurred in males and 123 in females.

One case of yaws occurred in a male.

IMMUNISATION

Poliomyelitis Vaccination. In February an attenuated oral vaccine was made available as an alternative to the killed vaccine, given by injection, which had been used since the inception of poliomyelitis vaccination in 1956. Apart from storage requirements, which included a 'deep-freeze', the transition presented no difficulties and the first sessions with the new vaccine were held at the end of March. Subsequently it was used for all vaccinations carried out by the Department, whether primary or booster doses, except in the case of some 30 persons who preferred, nostalgically perhaps, to complete their courses with the old vaccine by injection.

Supplies of the vaccine were always adequate, in contrast to marked shortage of Salk vaccine during the latter half of 1961, and the considerable waiting list for primary courses and fourth doses for school entrants was soon cleared.

Discussion continues on the respective immunological merits of the two vaccines, but the oral vaccine was undoubtedly easier and quicker to administer, as well as being more pleasant for the recipients. However, the fact that it was only supplied in multi-dose containers meant that it had to be given in sessions, and as a result many general practitioners continued to use the other vaccine.

The number of persons vaccinated with each preparation is shown in separate tables.

ANALYSIS OF VACCINATIONS

	Number of injections given during 1962					
	0—4 years	5—14 years	15—29 years	30—39 years	Others	Total
First ..	1,211	204	752	694	76	2,937
Second ..	1,241	313	959	825	102	3,440
Third ..	1,916	655	1,391	2,052	321	6,335
Fourth ..	6	341	7	—	—	354
TOTALS ..	4,374	1,513	3,109	3,571	499	13,066

	Number of oral doses given during 1962					
	0-4 years	5-14 years	15-29 years	30-39 years	Others	Total
First ..	3,955	3,453	681	645	120	8,854
Second ..	3,420	2,560	542	553	98	7,173
Third ..	4,939	2,439	1,574	1,796	303	11,051
Fourth ..	190	17,452	—	—	—	17,642
TOTALS ..	12,504	25,904	2,797	2,994	521	44,720

IMMUNITY INDEX

	Number of persons given primary courses at 31.12.62				
	0—4 years	5—14 years	15—29 years	30—39 years	Total
No. of persons ..	13,887	39,782	47,359	15,261	116,289
Estimated population	26,800	47,700	66,500	45,900	186,900
% Fully immunised	51·8	83·4	71·2	33·2	62·2

Diphtheria Immunisation. Routine immunisation of children under 5 years of age continued steadily throughout the year during which 4,250 completed courses of 3 injections, and 1,725 received booster doses at 12 to 18 months. The acceptance rate progressively increased during the last ten years and the percentage of pre-school children immunised rose from 52 in 1952 to 74 in 1962.

Primary immunisations carried out by general practitioners showed a considerable decrease, the number being 980 in 1962 compared with 1,520 in 1961. This was in spite of the fact that from April onwards triple antigen was supplied to them free of charge.

In 1961 the arrangements for diphtheria immunisation of school entrants were altered so that it was offered once annually, at the beginning of the academic year, instead of each term. As a result of this change only 104 primary courses and 1,048 booster doses were given during 1962, but arrangements were made for the remainder to be completed during the first 3 months of 1963.

ANALYSIS OF IMMUNISATIONS
Numbers carried out

		Primary Immunisations				Re-inforcing Injections	
		Pre-school children	School children	By Health Dept. Medical Staff	By General Practitioners	By Health Dept. Medical Staff	By General Practitioners
1952	..	3,686	1,206	4,102	790	4,871	142
53	..	3,609	779	3,182	1,206	3,418	143
54	..	3,436	753	2,525	1,664	3,161	227
55	..	4,390	1,001	3,723	1,668	3,540	218
56	..	3,125	787	2,586	1,326	2,628	159
57	..	3,487	345	2,589	1,243	1,266	143
58	..	3,595	939	3,423	1,111	6,154	160
59	..	3,704	662	3,186	1,180	3,142	113
60	..	4,167	820	3,744	1,243	2,483	249
61	..	5,022	1,078	4,580	1,520	3,135	304
62	..	4,250	104	3,374	980	2,922	151

**Progressive totals of children who had received a primary course of immunisation
by 31st December**

		0—4 years		5—14 years		0—14 years	
		No.	Percent.	No.	Percent.	No.	Percent.
1952	..	14,562	52	38,593	90	53,155	75
53	..	14,198	53	39,752	86	53,950	74
54	..	13,761	53	40,731	87	54,492	75
55	..	14,481	57	42,063	88	56,544	77
56	..	14,133	57	42,980	88	57,113	78
57	..	14,253	59	42,832	87	57,085	78
58	..	14,725	60	42,840	87	57,565	78
59	..	16,862	68	40,658	82	57,520	78
60	..	17,154	68	41,398	84	58,552	79
61	..	19,118	73	40,724	84	59,842	80
62	..	19,721	74	38,855	81	58,576	79

Whooping Cough. Primary vaccination courses were given to 4,199 children under 5 years of age, and booster doses at 12 to 18 months to 1,725 who had commenced immunisation at under 4 months of age.

This was the eighth year since vaccination commenced on a large scale, and the incidence of the disease has fallen from 1,024 cases in 1956 to 70 in 1962.

ANALYSIS OF VACCINATIONS

	1962	1961	1960	1959	1958	1957
By general practitioners	969	1,481	1,233	1,174	1,099	1,224
By Health Dept. medical staff	3,272	3,637	2,950	2,503	2,466	2,214
TOTAL	4,241	5,118	4,183	3,677	3,565	3,438

Tetanus Immunisation. A total of 4,215 pre-school children completed courses of 3 injections. With emphasis now being placed by hospital staff on protection against tetanus by the use of booster doses of tetanus toxoid rather than of tetanus antitoxin, this form of immunisation assumes greater importance. However, the problem of immunisation records being readily available to the hospitals still has to be solved.

Anaphylactic Reaction. A girl infant who was given a booster dose of triple antigen on her first birthday developed an acute anaphylactic reaction within 20 minutes. She responded to immediate treatment with adrenalin and was admitted to the Children's Hospital. There she was given antihistamines, and was discharged fit after 4 days.

Whichever component of the antigen was responsible remains uncertain but similar reactions to tetanus toxoid alone have been recently recorded in the medical literature.

Smallpox Vaccination. As a result of 5 separate importations of smallpox into this Country in December 1961, and January 1962, there were many inquiries and demands for vaccination, both to the Department and to general practitioners.

Vaccine lymph was initially in very short supply and later rationed by the Ministry of Health through the Public Health Laboratory Service, most being reserved for the affected areas. Although no case of smallpox occurred in or near to Nottingham, it would have been almost impossible to resist a demand for mass vaccination had supplies been available.

In the event, vaccination by the Department was restricted to persons at special risk and to unvaccinated children. General practitioners vaccinated or re-vaccinated 22,966 persons, most

of whom were adults. Many of these were required to have international vaccination certificates for travel abroad, although the exact number is not known.

The prominence which the localised outbreaks of the disease were given in the press, on radio and on television produced a small increase in the number of vaccinations of infants under one year of age, 47·6% of whom were vaccinated compared with 42·2% in 1961. Comment was made in 1961 that the acceptance rate had considerably fallen following the change in the immunisation time-table in September 1960. Smallpox vaccination then became the second procedure at 5 months, instead of being the first at 3 months of age. This fall was attributed to diminishing attendance at welfare centres as children became older.

Information was received from the Ministry of Health in November of this year that the Standing Medical Advisory Committee had recommended that primary smallpox vaccination should be carried out between 1 and 2 years of age, instead of at 5 months of age. It is expected that phasing of vaccination at a still later age will result in a further fall in the acceptance rate as memories of 1962 grow dim.

No serious complications of vaccination were reported, and no person required admission to hospital.

In August, a female infant aged 5 months died following an illness of 36 hours, 10 days after being vaccinated at a welfare centre. At the inquest, following a post mortem examination, vaccination was excluded as the cause of death, which was attributed to bronchiolitis and gastro-enteritis.

ANALYSIS OF VACCINATIONS

	Numbers of Persons Vaccinated						By Health Dept. Medical Staff
	Under 1 year	1—4 years	5—14 years	15 years & over	Total	By General Practi- tioners	
Primary Vaccination	2,946	2,127	4,069	5,915	15,057	11,221	3,836
Re- Vaccination	—	248	2,191	10,939	13,378	11,745	1,633

INFANT VACCINATION

			Primary vaccinations under 1 year of age	Percentage of births during same period
1953	..	..	2,056	39·4
54	..	..	1,971	37·9
55	..	..	1,143	23·2
56	..	..	1,537	29·8
57	..	..	2,229	45·4
58	..	..	3,456	65·3
59	..	..	3,504	64·8
60	..	..	2,447	43·0
61	..	..	2,463	42·2
62	..	..	2,946	47·6

B.C.G. Vaccination. Up to July 1962 consent forms for vaccination of 13 year olds were sent by post to the parents of each child. In the second half of the year all consent forms were distributed by the teachers for the children to take home. The number of cards distributed by the two methods was roughly equal. There was no decrease in the acceptance rate, which has been close to 70% for a number of years, as a result of this change. The value of B.C.G. vaccination has always been well accepted by the schools and by the children themselves.

Of the number given Heaf tests 13·2% were found to be positive reactors. This is marginally less than the average for

the previous 5 years but is higher than the proportion, 8·3%, of those tested in 1961. There is, however, a considerable annual variation.

Positive reactors to the test were all referred for X-ray and two girls, from different schools, were admitted to a chest hospital. One of them was found to have an acute chest infection which was not tuberculosis, but the second girl had active tuberculosis and was an infectious case. Investigation of the contacts of this case was still proceeding at the end of the year.

There were 82 strongly positive reactors who were recalled for re X-ray after 3 months. Thirteen children were also re X-rayed at the request of the Chest Physician, and a further five were clinically examined and kept under observation. None of these was found to be suffering from tuberculosis.

ANALYSIS OF VACCINATIONS

	1962	1961	1960	1959	1958	1957
Schools visited	50	51	46	57	47	53
No. of 13 year olds ..	5,038	5,306	6,410	5,660	4,369	5,605
,, acceptances ..	3,855*	3,897	4,443	3,775	2,949	4,160
,, refusals ..	1,076	1,297	1,853	1,732	1,340	1,327
,, others ..	107	112	114	153	80	118
No. tested	3,608	3,674	4,154	3,574	2,741	4,138
negative reactors						
vaccinated ..	3,044	3,308	3,553	3,069	2,274	3,333
positive reactors ..	479†	307	524	418	399	700
Vaccination inspections ..	2,577	3,169	2,908	2,823	2,198	2,130

* Average % of acceptances 1957-1962 was 71·2%.
 † Average % of positive reactions 1957-1962 was 12·9%

Yellow Fever. A total of 415 persons were vaccinated in sessions held at 134 Mansfield Road at 2.30 p.m. on the Wednesday of each week.

AMBULANCE SERVICE

Foreword. I have pleasure in acknowledging this contribution by Mr. Ben England, M.I.Mech.E., M.Inst.T., the General Manager, on the fifteenth year of the Nottingham City Ambulance Service, and also his ready co-operation up to the time of his retirement in December, when Mr. J. C. Wake, A.C.I.S., M.Inst.T., M.I.R.T.E. was appointed.

Salaried Staff. The only change this year has been the resignation of Staff Officer Worth to take up an appointment as a Superintendent in Gloucestershire County Council Ambulance Service. The vacancy created by Mr. Worth's resignation was filled by the promotion of Leading Driver H. R. Croft to Staff Officer.

The death occurred in April of Mr. A. K. Hicks, who was Chief Ambulance Officer from 1948 to 1959, when he obtained the post of Chief Ambulance Officer to Warwickshire County Council.

Mr. R. G. Yates, who was Deputy Chief Ambulance Officer from 1953 to 1956, when he became Chief Ambulance Officer to Kingston-upon-Hull County Borough, was appointed to the post of Chief Ambulance Officer to Staffordshire County Council in November.

Employees. One extra driver/attendant has been engaged this year, making the total number of employees seventy-seven. This consists of seven leading drivers, sixty-two male driver/attendants, and eight female driver/attendants.

It is necessary to stagger the number of employees on duty during the day and night, and to secure greater effectiveness from the employees available a new rota system was introduced in November, which provides for more employees to be on duty in the early part of each week day. Unfortunately, the provision of sufficient employees for the period of the normal working week that is known to be busy results in having to make very sparse the cover for the less busy parts of the week, and so the manning at the weekends is reduced to an unsatisfactory level.

In the Annual Report for 1961, a table showing the driver/attendant to patient ratio was given for the first time, and this is again included, with the figures for 1962, on the table on page 74. It will be seen that the proportion of driver/attendants to patients continues to reduce, which, after a certain point, can only mean a deterioration of the service given. That point has been passed, and, in my opinion, the service given is therefore suffering.

Vehicle Fleet. Two ambulances and two dual-purpose vehicles were ordered and delivered during the year, all in glass fibre construction. Three of these vehicles were replacements and one dual-purpose vehicle was an addition to the fleet.

A further replacement dual-purpose vehicle was ordered in August, when its predecessor was found to be unfit for further service after seven years' use instead of the normal ten years' expected life.

The following old vehicles were sold during the year:—

<i>Type of Vehicle</i>	<i>Fleet No.</i>	<i>Reg. No.</i>	<i>Date of first Registration</i>	<i>Net Amount Received</i>
Humber Ambulances	924	NAU 777	2. 1.51	} £60
27 h.p. ..	925	NTO 925	21. 5.51	
	927	NTV 396	24. 9.51	
Austin Hire-car 2·2 litres (dismantled) ..	933	LTV 983	11.12.49	£1
Austin Hire-car 2·2 litres ..	934	MTO 199	13. 3.50	£150
Humber Ambulance 27 h.p.	928	NTV 397	24.10.51	£20

All three rotary shift ambulances are now equipped with Minuteman resuscitation apparatus.

The following table shows the further increase in the proportion of patients to driver/attendants and vehicles.

Year	Patients	Driver Attendants	Ratio	Vehicles	Ratio
1949 ..	54,297	60	1 : 904	22	1 : 2,468
50 ..	62,858	61	1 : 1,030	22	1 : 2,857
51 ..	68,896	61	1 : 1,129	26	1 : 2,649
52 ..	71,737	55	1 : 1,304	25	1 : 2,869
53 ..	75,104	58	1 : 1,294	23	1 : 3,265
54★ ..	87,355	60	1 : 1,455	24	1 : 3,639
55★ ..	93,405	63	1 : 1,482	27	1 : 3,459
56★ ..	95,551	70	1 : 1,365	29	1 : 3,294
57 ..	92,798	70	1 : 1,325	29	1 : 3,199
58 ..	100,079	70	1 : 1,429	29	1 : 3,451
59 ..	111,011	70	1 : 1,585	29	1 : 3,827
60 ..	125,597	72	1 : 1,744	29	1 : 4,330
61 ..	147,843	76†	1 : 1,945	30	1 : 4,928
62	157,736	77	1 : 2,048	30	1 : 5,258

★ The Annual Reports for these years commented upon the need for additional driver/attendants and vehicles, as the Service was stretched to the limit.

† 42 hour week introduced.

Civil Defence. Civil Defence Circular 18/62 has had a beneficial effect in ensuring the attainment of a satisfactory degree of training by the members of the Ambulance and First Aid Section, but the provision of A and B category classes, in addition to courses for the semi-active Reserve, will impose a great strain on the instructors.

The instructing strength was increased to four, in October, by the success of the Deputy Chief Ambulance Officer at the Home Office Civil Defence School.

Driving instruction to members of all sections of the Nottingham Division of the Civil Defence Corps continues to be given by six of the City Ambulance Service personnel, under the supervision of the Staff Officer, Civil Defence.

During the year 8 pupils (of whom 6 were members of the Ambulance and First Aid Section and 2 were members of the Headquarters Section) have passed the Ministry of Transport driving test.

Sub-Control. During the year the Sub-Control at the General Hospital was abandoned, mainly due to lack of space in the hospital. This, surprisingly, has resulted in a better control of the fleet, due to increased flexibility.

Mileage and Patients. The figures are in appendices A and C: the highest number of patients carried on any one day during the year was 672 on 16th November, compared with 633 on 8th November, 1961, the previous record day.

The record day's mileage of 2,227 on 11th January, 1961, was exceeded on 6th April when the vehicles ran 2,246 miles.

During 1962 a total of 157,736 patients was conveyed over a distance of 503,812 miles, as tabulated in appendix A: the increase

in the number of patients compared with 1961 was 9,893, and the decrease in mileage was 6,206 miles.

The demand on the ambulance service continues to increase, one monthly total exceeding 15,000 patients for the first time.

Mentally-afflicted day-patients continue to monopolise a large part of the fleet and the time of the employees. 220 of these patients are now carried daily.

Arrangements were made during the year to relieve the ambulance service of non-essential mileage by the provision of taxis for the return of midwives accompanying cases to hospital and for the return of the Emergency Obstetric Units to hospital if the patient was not conveyed.

The City Ambulance Service now acts as agent to Nottinghamshire County Council and Derbyshire County Council Ambulance Services in transporting the Emergency Obstetric Units from both the City Hospital and the Women's Hospital into those counties.

Long-Distance Journeys. There was a decrease of 23 in the number of road journeys by ambulance service vehicles, compared with the 1961 total of 89. The principal destinations were Leeds and Sheffield.

A total of 182 patients was conveyed by rail, one more than in 1961. The principal destinations were Sheffield, London and Skegness.

Patients carried by omnibus in 1962 numbered 33 compared with 28 in 1961.

Emergency Cases. There has been no major disaster this year, the only item of interest under this heading being the omnibus which overturned with a full load in Arnold on 14th

November. Although this accident occurred in the County, the City Ambulance Service provided three ambulances in assistance.

Emergency cases for the year have totalled 6,364, compared with 6,111 during 1961. The highest number of emergency cases on any day was 33 on 31st March and 2nd November, compared with 34 cases on the 25th December, 1961.

The percentage of emergency patients in relation to the total number of patients carried is 4·2%.

Rechargeable Mileage. During the year, 941 patients have been conveyed for 26 other authorities, giving rechargeable figures of 1,625 sitting-case vehicle miles and 2,534 ambulance miles.

Working Expenses per Vehicle Mile. Separate figures are not available for ambulances and for sitting-case vehicles: working expenses per vehicle mile were 44·77d. as tabulated in appendix C: they are intended to be an indication of the trend of working expenses, so they exclude loan charges, ambulance services hired, the cost of land and services for new ambulance stations, the installation of wireless equipment, and the cost of any vehicles bought out of revenue.

Visits. There have been the usual number of visits to the ambulance service by interested groups throughout the year.

Provision of Midwives. In October the City Ambulance Service undertook the responsibility of receiving all calls for midwives between the hours of 6.00 p.m. and 8.00 a.m. The Supervisor of Midwives provides the ambulance service with a list of midwives on duty in each district nightly, so that a midwife is available for each call.

APPENDIX A

Month	Emergencies		Admissions		Discharges		Outpatients		Unclassified		Service	Total	
	P.	M.	P.	M.	P.	M.	P.	M.	P.	M.	M.	P.	M.
1962													
JANUARY ..	504	2,532	928	6,819	927	5,055	9,733	26,183	59	439	1,705	12,151	42,733
FEBRUARY ..	484	2,375	855	5,946	917	3,913	9,591	24,487	57	768	1,572	11,904	39,061
MARCH ..	462	2,217	915	6,418	1,022	4,906	11,078	28,161	66	672	1,597	13,543	43,971
APRIL ..	511	2,524	878	6,417	846	4,589	9,855	25,238	34	220	2,089	12,124	41,077
MAY ..	532	2,564	833	5,729	911	3,606	12,162	30,106	53	352	1,943	14,491	44,300
JUNE ..	594	2,983	790	5,593	812	3,768	10,451	25,784	58	520	1,471	12,705	40,119
JULY ..	522	2,493	754	5,384	948	3,628	11,445	28,055	58	861	1,634	13,727	42,055
AUGUST ..	496	2,568	760	5,426	795	3,971	11,138	26,714	65	753	1,701	13,254	41,133
SEPTEMBER ..	530	2,669	806	5,729	961	4,792	10,661	26,082	53	304	1,511	13,011	41,087
OCTOBER ..	569	2,740	816	6,088	1,059	4,823	12,663	29,720	43	292	2,244	15,150	45,907
NOVEMBER ..	535	2,745	813	5,692	960	3,661	12,259	29,970	55	311	1,591	14,622	43,970
DECEMBER ..	625	3,115	877	5,892	940	4,543	8,556	22,710	56	413	1,726	11,054	38,399
TOTAL ..	6,364	31,525	10,025	71,133	11,098	51,255	129,592	323,210	657	5,905	20,784	157,736	503,812

P = Patients. M = Miles.

APPENDIX B.

PATIENTS AND MILES BY EACH TYPE OF VEHICLE

Month	Ambulances		Sitting-Case Cars		Dual-purpose Vehicles		Total	
1962	Patients	Miles	Patients	Miles	Patients	Miles	Patients	Miles
Jan. ..	5,546	22,444	723	3,338	5,882	16,951	12,151	42,733
Feb. ..	5,321	20,321	780	2,882	5,803	15,858	11,904	39,061
Mar. ..	5,592	22,349	936	3,505	7,015	18,117	13,543	43,971
April ..	5,149	21,744	594	2,539	6,381	16,794	12,124	41,077
May ..	6,135	22,769	835	3,420	7,521	18,111	14,491	44,300
June ..	5,296	20,443	705	3,023	6,704	16,653	12,705	40,119
July ..	5,777	21,036	805	3,256	7,145	17,763	13,727	42,055
Aug. ..	5,357	20,567	429	1,900	7,468	18,666	13,254	41,133
Sept. ..	5,148	20,301	551	2,467	7,312	18,319	13,011	41,087
Oct. ..	6,007	22,883	624	2,868	8,519	20,156	15,150	45,907
Nov. ..	5,940	21,492	642	2,530	8,040	19,948	14,622	43,970
Dec. ..	4,933	20,230	470	2,209	5,651	15,960	11,054	38,399
TOTALS	66,201	256,579	8,094	33,937	83,441	213,296	157,736	503,812

APPENDIX C. FINANCIAL SUMMARY AND STATISTICAL RECORD FROM 1948 to 1962

Year ended on 31st December	Total miles 1	Total patients 2	Average miles per patient 3	Patients carried per thousand miles run 4	Cost per vehicle mile for year ended on preceding 31st March 5	Maximum mileage on any one day 6	Maximum No. of patients on any one day 7	Highest No. of emergency calls on any one day 8	Total expenditure for year ended on preceding 31st March 9
1948 .. (6 months)	147,317	23,301	6.32	158.17	d. —	—	—	—	£ —
1949 ..	301,426	54,297	5.55	180.13	22.66	1,498	246	27	28,154 (9 months)
1950 ..	321,673	62,858	5.12	195.41	27.92	1,445	287	25	37,440
1955 ..	389,311	93,405	4.09	244.36	34.17	1,865	429	34	58,578
1956 ..	397,636	95,551	4.09	244.41	33.45	1,658	425	30	60,947
1957 ..	369,790	92,798	3.93	254.68	40.49	1,477	402	33	68,588
1958 ..	396,834	100,079	3.92	255.38	42.73	1,798	468	33	70,521
1959 ..	453,686	111,011	4.04	247.28	40.80	1,957	528	31	85,730
1960 ..	470,140	125,597	3.71	269.60	37.47	1,980	568	34	85,605
1961 ..	510,018	147,843	3.43	291.33	39.64	2,227	633	34	92,247
1962 ..	503,812	157,736	3.19	313.48	44.77	2,246	672	33	107,369

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

CARE OF OLDER PEOPLE

Requests for help in the care of older people showed little change; whilst there was no diminution in the number of elderly men and women who had become mentally confused, there was an increase in the number living alone and in those who needed continuous support.

With the agreement of the family doctor, suitable patients were admitted for short term care to the City Hospital by arrangement with the geriatric physician, and, because of the knowledge that help was available when necessary, families showed a greater willingness to undertake the care of an exacting relative.

Relatives, neighbours and the Home Help Service assisted many elderly people with their housework, shopping and cooking.

Voluntary Services. As before, on recommendation by the Health or Welfare Department, the Women's Voluntary Service provided hot meals twice weekly to those in need; though there was a growing demand it had not been possible to increase this service.

The visiting scheme of the Women's Voluntary Service continued with the guidance of a Senior Medical Officer; 53 old people were visited at home by 39 members of the Service, the visits being made weekly or once a fortnight except in cases of acute illness when the visitor called daily. In addition, 11 members visited 16 elderly people in the geriatric unit of the City Hospital. In all, therefore, 69 older people were visited.

Health Visiting. Information about elderly people in need was received from many sources; though the number of new cases visited was approximately the same, there was a decrease in the number of re-visits. Agencies through which assistance was arranged by health visitors are listed in the table below.

Each week a health visitor visited the geriatric unit of the General Hospital and also that of the City Hospital, not only to receive information concerning those about to be discharged but also to report progress of those who had returned to their families.

Cases reported by	1962	1961	1960	1959	1958
Geriatric unit—after care ..	152	152	114	116	139
„ „ reports ..	—	33	84	53	54
Health Department ..	60	46	60	30	96
General Hospital ..	41	45	45	32	40
General practitioners ..	40	41	46	48	54
Welfare Services Department	39	11	26	8	29
Relations and neighbours ..	35	41	46	43	44
Health visitors ..	31	65	88	106	37
Voluntary organisations ..	30	15	24	11	30
Clergy	—	—	—	1	1
Others	70	44	34	26	8
Total new visits	498	493	567	474	532
Re-visits	3,920	4,078	4,332	4,299	4,107
Total	4,418	4,571	4,899	4,773	4,639

Assistance arranged through ..	1962	1961	1960	1959	1958
Home Help Service ..	164	193	213	113	214
General practitioner ..	127	102	174	118	198
Relatives—advice ..	90	108	100	113	97
Welfare Services Department	72	94	102	84	98
W.V.S.: Meals on wheels ..	67	47	66	65	78
General Dispensary: Chiropody	50	65	67	46	84
W.V.S. clothing ..	49	49	76	80	85
Housing Department ..	47	42	29	42	39
National Assistance Board ..	41	64	56	64	52
Public health inspector ..	29	47	54	35	26
Convalescence	20	27	60	32	25
Blind Institute	15	4	6	8	11
Council of Social Service ..	11	26	29	26	24
Total	782	868	1,032	826	1,031

Chiropody. Treatment of persons in the priority groups is provided through the agency of the Nottingham General Dispensary with whom the arrangements continue to work smoothly. New patients are recommended by general practitioners, medical officers, health visitors, home nurses and midwives. The table shows the number of those treated in each group and the number of treatments given.

Priority Group	No. of Persons			No. of treatments
	Surgery	Home	Total	
Aged	3,182	498	3,680	20,882
Handicapped ..	100	31	131	534
Expectant mothers ..	16	2	18	64
TOTAL	3,298	531	3,829	21,480

In 1961 a total of 3,685 persons in the priority groups received 22,652 treatments. It will be seen that the number of patients treated increased in 1962, though the actual number of treatments given decreased because the staff of chiropodists at the General Dispensary was four less than in the previous year.

NUFFIELD HOUSE

In the seven years since its foundation, the Octagon Club at Nuffield House has continued to make a valuable contribution towards the prevention of mental deterioration among the elderly as well as the care of older people who would, otherwise, have required admission to hospital.

Attendance. There were 57 new admissions, the average daily attendance being 43, and at the end of the year 82 persons were on the register, compared with 76 at the beginning. A few new members experienced difficulty in joining an established group and did not attend for more than five days.

The proportion of women to men remained unchanged at about 8 women to each man, but, contrary to expectation, the average ages showed little difference, being 74 and 72 years respectively. About half of the members lived alone as compared with one third in 1960, and the remainder lived with relatives.

The tables classify the members enrolled in 1962 into three groups, according to the reason for their attendance; those discharged from a mental hospital and who needed day care; those living alone who needed companionship; and those living with relatives who by their attendance widened their interests and eased the burden of care at home, thus maintaining the family unity.

During the year 8 members died and 13 were admitted to a mental hospital. Residential accommodation was arranged under the National Assistance Act for one member who could no longer live alone, and the names of four women and one man were placed on the waiting list for admission to similar homes.



Going strong !

NEW MEMBERS						
MEN						
Reason for attendance		Improved	No change	Deteriorated	Short★ stay	Total
Hospital discharge ..		2	2	1	—	5
Living alone		2	1	—	1	4
Relief for relative ..		6	3	—	—	9
TOTAL		10	6	1	1	18
WOMEN						
Reason for attendance		Improved	No change	Deteriorated	Short★ stay	Total
Hospital discharge ..		1	3	—	1	5
Living alone		11	6	3	4	24
Relief for relative ..		7	2	—	1	10
TOTAL		19	11	3	6	39

★ Attended less than 5 days

Staff. The complement of supervisory and occupational staff remained unchanged, and the employment of daily domestic staff in place of a residential caretaker remained a satisfactory arrangement.

Occupations. Owing to a slight increase in the daily attendance there was no easing of the crowded conditions under which the women worked.

Transport. The travelling arrangements continued along lines similar to last year and worked smoothly.

PREVENTION OF BREAK-UP OF FAMILIES

Meetings of the Co-ordinating Committee of statutory and voluntary social services were held on 13 occasions during the year.

Of the 50 families whose circumstances were discussed, 21 were new cases and the following table indicates the various agencies by which they were referred to the Committee.

Housing Dept.	..	..	8
N.S.P.C.C.	..	..	7
National Assistance Board		..	4
Estates Dept.	..	..	1
Welfare Services Dept.		..	1
			—
			21

The factor which brought the majority of the new cases to notice was rent arrears and the threat of eviction. The Committee's concern was that this could result in the parents being separated from their children until they could find alternative accommodation.

The pooling of information about individual cases and the improved understanding between field workers from the different services continued to prove of value. Moreover, the discussions led, in most cases, to the responsibility for action or supervision of the family being given to one worker who would arrange for the case to be reviewed at a future meeting of the Committee if necessary.

TUBERCULOSIS

Bacille-Calmette-Guerin Vaccination. Tuberculin tests were carried out on 629 young contacts of cases of tuberculosis, and 464 negative reactors were vaccinated. A further 123 very young infants were vaccinated without prior skin tests.

Rehousing. Applications for rehousing on the grounds of tuberculosis were considered in conjunction with the Chest Physician at Forest Dene Chest Centre. The number who qualified was six, and these were all rehoused during the year.

Year	Recom- mendations made	Families re-housed		
		Re-lets	New	Total
Prior to 1953 ..	356	86	148	234
1953	183	77	124	201
1954	100	65	51	116
1955	110	64	39	103
1956	123	54	52	106
1957	78	43	39	82
1958	52	24	27	51
1959	41	10	37	47
1960	31	22	6	28
1961	5	5	—	5
1962	6	4	3	7
TOTALS ..	1,085	454	526	980

Care Committee. As a result of the continued reduction in the number of applicants receiving milk at a reduced rate meetings were again held only once a month.

Other Social Work. Patients were assisted with clothing through a number of statutory and voluntary bodies. The National Assistance Board provided some furniture and other household necessities for three cases.

A total of eight children from four families were taken into care by the Children’s Department while parents were undergoing treatment in hospital.

The Ministry of Health provided a power-propelled tricycle to assist one patient in travelling to work. He had previously completed a course in radio and television servicing at the Portland Training College.

Grants from various Regimental Funds were made to a number of ex-servicemen.

Two patients attended for occupational therapy at the Welfare Services Department, and two others were provided with occupation at home by the British Red Cross Society.

A young married man attended a Ministry of Labour Resettlement Unit and a hospital resettlement clinic but a satisfactory outcome has not yet been achieved.

Type of Assistance	1962			1961	1960	1959
	Cases brought forward	New Cases	Total	Cases	Cases	Cases
Milk at reduced rate ..	26	18	44	146	112	197
Referred to National Assistance Board ..	—	103	103	160	264	286
Loan of bedding ..	27	6	33	32	53	88
Loan of nursing equipment ..	—	—	—	22	50	79
Domestic help { Home Help ..	—	11	11	20	21	19
{ Service ..	—	—	—	2	16	48
{ Other help ..	—	—	—	—	—	—
Financial advice ..	—	70	70	58	*	*
Housing ..	—	34	34	39	*	*
Advice—general ..	—	18	18	25	*	*
Clothing provided ..	—	37	37	27	35	68
Child care arranged ..	—	5	5	16	*	*
Employment arrangements ..	—	57	57	102	83	79
Training arrangements ..	—	13	13	14	26	33
Convalescence ..	—	7	7	8	21	16
Other matters, inc. ..	—	—	—	—	—	—
Occup. Therapy ..	1	54	55	152	243	286
TOTALS ..	54	433	487	723	924	1,199

* Previously included in “Other matters”.

Notification of Tuberculosis in Immigrants. Twenty-two immigrants were notified as having active tuberculosis. This is two fewer than in 1961. On account of the language difficulty, information on the date of arrival could not always be ascertained with certainty. However, all of them had been in this Country for less than six years, and half of them for less than two years.

Nationality			1962	1961	1960	1959
Asian	..	..	16	11	9	18
African	..	..	—	—	2	1
European	..	..	5	4	12	18
West Indian	..	..	1	7	1	2
Eireann	..	..	—	2	1	1
TOTAL			22	24	25	40

NOTIFIED CASES ON CLINIC REGISTER											
	PULMONARY			NON-PULMONARY			Total				
	Adults		Child- ren	Adults		Child- ren	1962	1961	1960	1959	1958
	M.	F.		M.	F.						
Cases b/forward	1,113	1,101	188	36	104	26	2,568	2,864	3,183	3,359	3,728
Additions Children who became adults	6	5	—	2	1	—	14				
Notified cases including positive contacts	107	62	17	8	14	2	210	179	191	288	345
Inward transfers & 'lost' cases returned	27	18	1	—	—	—	46	50	66	72	84
TOTAL	1,253	1,186	206	46	119	28	2,838	3,093	3,440	3,719	4,157
Removals Recovered	135	108	23	9	16	—	291	525	576	536	798
Died (all causes)	48	8	—	1	1	—	58				
Transfers out	32	35	6	2	—	—	75				
'Lost' cases	15	12	—	2	1	—	30				
Children who became adults	—	—	11	—	—	3	14				
TOTAL	230	163	40	14	18	3	468	525	576	536	798
On clinic register 31st Dec.	1,023	1,023	166	32	101	25	2,370	2,568	2,864	3,183	3,359
EXAMINATION OF CONTACTS:											
No. of contacts investigated New 1,362											
Old 1,330 ..							2,692	2,385	2,676	2,896	3,248
No. of contacts found to be tuberculous ..							19	22	8	7	10
Percentage found to be tuberculous ..							0·71	0·92	0·3	·242	·308
DEATHS FROM TUBERCULOSIS ..							24*	27	27	29	54
DEATH RATE PER 1,000 POPULATION ..							0·08	0·08	0·08	0·09	0·17
WORK OF THE HEALTH VISITORS:											
No. of visits paid to patients' homes ..							11,666	12,406	12,769	13,781	13,605

★ Local registrars' returns.

CONVALESCENCE

Convalescent care was arranged for people recovering from illness or operation, when recommended by the family doctor; in most instances the period was limited to two weeks. There were 132 applications, fewer by 34 than last year, of which 79 were accepted.

Those who could not be assisted were referred for help to a voluntary agency, either the British Legion, the Nottingham and Nottinghamshire Council of Social Service, the Nottingham Co-operative Society or the Nottingham Cripples Seaside Home and Mission.

The Health Committee contributed towards the maintenance of 34 patients at independent homes, of whom 26 were helped with fares. Two paid all their own expenses. These arrangements provided, in the main, a recuperative holiday for elderly people after prolonged winter illness, but also assisted three debilitated mothers each with a small child.

Arrangements for convalescence were also made at the Sheffield Regional Hospital Board's Home at Skegness for 43 people following their return home from hospital.

The types of illness requiring convalescent care have shown little variation during the past 5 years, the main ones being respiratory infections, cardio-vascular disease and rheumatic and nervous disorders, while general debility in older people resulting from malnutrition remained at the same high level as before.

There was no alteration in the proportion of women to men who were recommended for recuperative holiday; it remained at three to one.

Convalescence arranged 1958-1962

Name of Convalescent Home	1962	1961	1960	1959	1958
Regional Hospital Board Homes					
<i>Sheffield Region:</i>					
Carey House, Skegness	25	17	37	54	47
Seely House, Skegness	18	12	30	37	32
Sheffield Works' Conv. Assn.:—					
Claremont House, Matlock	—	—	1	2	9
Stubben Edge Hall, Ashover	—	—	—	1	1
Langwith Lodge, Nether Langwith ..	—	—	2	—	—
<i>South East Metropolitan Region:</i>					
Thomas Lye C. H. Brighton	—	—	—	—	1
Metropolitan C. H., for Women, ..					
Bexhill-on-Sea	—	1	—	—	—
TOTAL	43	30	70	94	90
Independent Homes					
George Woofinden Home, Mablethorpe ..	27	33	38	28	28
Evelyn Devonshire Home, Buxton ..	5	4	4	1	1
Hunstanton C. H.	—	2	8	2	4
West Hill C. H., Southport	—	—	—	—	1
Sheffield Works' Conv. Assn.:—					
Claremont House, Matlock	—	4	6	6	6
Stubben Edge Hall, Ashover	—	2	1	2	2
All Saints', Eastbourne	—	—	—	—	1
John Howard C. H., Brighton	—	—	—	1	—
Boarbank Hall, Grange-over-Sands ..	—	1	1	1	1
Charnwood Forest Children's C. H. ..	—	—	—	1	—
Mental After Care Assn. Home, Westgate ..	—	—	1	—	—
Shoreditch H. and R.H., Copthorne ..	2	—	—	—	—
Church Army H. H., Bexhill-on-Sea ..	1	—	—	—	—
Thomas Banting M. H., Bexhill-on-Sea ..	1	—	—	—	—
Sundial Rest Home, Hallaton	—	—	—	—	1
Bolton Hospital Saturday Council, Milne, ..					
Southport	—	—	—	1	—
Hillside Nursing Home, Newark	—	1	—	—	—
Y.M.C.A., Skegness	—	1	—	—	—
TOTAL	36	48	59	43	45

Age Distribution

	Regional Hospital Board Homes			Independent Homes		
	Men	Women	Total	Men	Women	Total
20-29 years	—	—	—	—	1	1
30-39 „	—	2	2	—	5	5
40-49 „	1	3	4	—	3	3
50-59 „	9	6	15	—	3	3
60-69 „	6	7	13	3	8	11
70-79 „	2	7	9	2	9	11
80-89 „	—	—	—	—	2	2
	18	25	43	5	31	36

Type of Illness		Numbers sent to Regional Hospital Board Homes					Numbers sent to Independent Homes				
		1962	1961	1960	1959	1958	1962	1961	1960	1959	1958
Respiratory	..	14	6	15	31	32	4	14	14	4	10
Cardio-vascular	..	9	1	12	13	10	6	3	6	5	5
Rheumatic	..	2	2	8	4	6	7	7	7	6	6
Nervous	.. ..	4	5	5	2	6	4	7	15	10	9
Digestive	.. ..	2	6	8	15	5	—	1	—	1	2
Reproductive	.. ..	1	2	7	9	6	—	1	—	2	—
Injury	.. ..	1	2	—	4	5	—	—	2	—	—
Urinary	.. ..	1	—	3	3	5	—	—	1	—	1
Diabetic	.. ..	1	—	4	2	3	—	—	—	—	1
Endocrine	.. ..	—	—	—	1	—	—	—	—	—	—
Debility	.. ..	1	5	4	4	6	15	13	13	13	8
Others	.. ..	7	1	4	6	6	—	2	1	2	3
TOTAL	.. ..	43	30	70	94	90	36	48	59	43	45

HEALTH EDUCATION

Meetings of the staff committee representing various departments of the Health Services took place on six occasions. Leaflets and posters were considered and designs for the window displays were discussed.

In addition to using the window of the Welfare Foods Distribution Centre, displays were mounted in the window of a City Centre bank by the courtesy of the Manager.

During the year the use of the film projector at welfare centre sessions was increased considerably. A total of thirty-two films were previewed by the staff committee to select material of suitable content and length to meet the needs of the different types of session and audience. Two health visitors were trained in the use of the film projector to enable them to use films in their health education work more frequently than would be possible if the services of a projectionist were required.

Films concerning baby care and child management were shown at infant and toddler clinics, and also at relaxation classes where there was considerable interest in films describing ante-natal care and showing the birth of a baby. It was felt that films were of great value in teaching expectant mothers, especially those experiencing their first pregnancy, who, in addition to being a receptive audience, were not distracted by young children during the teaching.

A public health inspector was also trained to use the equipment so that films dealing with subjects such as "Food Hygiene" and "Clean Air" could be exhibited when the occasion arose.

Talks were given on a number of occasions by members of staff to various organisations.

The report of the Royal College of Physicians on Smoking and Lung Cancer and the observations of the tobacco manufacturers were considered by the Health Committee, who felt

that the facts were sufficiently known for every adult to take a personal decision on this problem, but that the dangers of cigarette smoking should be brought to the notice of children and adolescents.

Three dimensional posters were produced by the health education assistant on subjects such as poliomyelitis immunisation, dental health, and essential elements of the diet, for display at welfare centres and in the Health Services Headquarters.

Displays were mounted in the window of the Welfare Foods Distribution Centre for periods of one month on the following topics:—

January.	Coughs and Sneezes. "Spreading Germs".
February.	Clean Air. "Housewives Choice for Clean Air".
March.	Immunisation. "Immunisation Will Protect".—General.
April.	Food Hygiene. "Dirty Food is Dangerous".
May.	Flies and Dustbins. "Keep Lid Shut".
June.	Kitchen Hygiene. "Use Hot Water for Washing Up".
July.	Holiday Hazard. "Enjoy your picnic with no regrets".
August.	Health Visiting Centenary.
September.	Immunisation. "Immunisation Will Protect".—Poliomyelitis
October.	Dental Care. "Look after your Teeth".
November.	Smoke Control. "Smoke Control Areas".
December.	Christmas Greetings.

Exhibits were placed in the window of a bank in the Old Market Square for two weeks in each of the following months.

February.	How Air Pollution is Measured.
April.	Exercise for Health. "Walking for Health".
July.	Immunisation. "Immunisation Will Protect".—Poliomyelitis
August.	Health Visiting Centenary.
November.	Dental Care. "Look after your teeth."

During one week in October, the Old People's Welfare Committee of the Nottingham Council of Social Service held an exhibition depicting the work of the various statutory and voluntary bodies in the care of the elderly, to which the Department contributed a stand describing the services of the local health authority in this field. A photograph of the exhibit is shewn opposite.

HOME HELP SERVICE

There was a reduction in applications for all types of cases throughout the year, with the exception of an increased number from West Indian women requiring help following confinement at home.

The number of cases brought forward from 1961 showed an increase of approximately 100 to 2,103 and the figure of those to be carried forward to 1963 will be higher again. This is of some importance as it reflects the increasing numbers of cases requiring continuous help over a period of years.

New cases assisted were only slightly less in number than during the previous year though, to keep within the financial allocation to the Service, it had been necessary to reduce the amount of help provided during the first three months. It continued to be necessary to limit the amount of help allocated in each case strictly to the minimum required.

Recruitment of new helpers was poor initially, but improved considerably during the latter half of the year.

Social Cases. Several cases were referred for help. In one or two instances the circumstances were pathetic, and required a specially selected home help to deal with the many problems which arose.

In one such case help had been supplied for approximately three years to a motherless family. When the youngest child was admitted to a day nursery, however, the father decided to work longer hours thereby augmenting his income. This resulted in an increased assessment, whereupon he refused to pay the higher charge and cancelled the help. At a later date an application was made on his behalf by an N.S.P.C.C.

officer, as one child was ill and the eldest child was staying away from school to care for him. When visited, the home showed signs of neglect, and the children had been allowed to run wild in the streets. The N.S.P.C.C. and school welfare officer hope to persuade this man to pay the assessed rate for home help so as to avoid the need to place the children in foster homes.

The two male helpers were employed mainly on the cleansing of the homes of certain aged persons. It is to be regretted that the Home Help Service is not notified of many cases of this sort until the deterioration has reached a stage when any lasting improvement may depend upon the provision of daily help.

Maternity Cases. There were numerous applications for help from West Indian women—mostly unmarried. Many were emergency applications, referred by the midwife, as it appeared to be erroneously believed by these women that they would be automatically admitted to hospital, and at the same time receive National Assistance. In cases where the “husband” was wage earning, and it was pointed out that a contribution would be required towards the cost, help was often not accepted. In almost every instance the comment was “Why should we have to pay for the help?—it should be free under the Welfare State”. Conditions varied considerably in these homes, many of which consisted of one or two rooms in lodging houses; cooking and washing facilities were often negligible, and usually consisted of a communal gas stove situated on the landing and a wash basin in the bathroon—the only means of obtaining water. All hot water had to be heated in kettles on the gas stove and much ingenuity was required on the part of the helper. In spite of the difficulties several helpers enjoyed working on such cases. In several instances help had been supplied on two or three previous occasions.

Tuberculosis Cases. The number of applications was again very low. In one or two instances, however, the condition of the person concerned was such as to make daily help essential.

Carcinoma Cases. There was a marked increase in requests for help in this group. This problem is causing concern as many sufferers were women between the ages of 35 and 50 with young families and consequently full time help was essential. It was often found that the nature of the disease was not known to the patient or to the family who, in consequence, did not realise the seriousness of the position. On occasions where there was no hope of recovery the home helper was requested to break the news to the children. It was essential to continue to provide help after the death of the mother where there were young children under school age.

Mental Illness. Several applications received during 1961 required continued help this year. In one instance the mother of several small children was re-admitted to mental hospital, where she remained for a period of months. On returning home and finding work as a cleaner in a local public house, she omitted to take the prescribed tablets and her condition rapidly deteriorated. She attempted suicide on more than one occasion and made efforts to harm the little girl. On one occasion she had been missing for several hours and was eventually found wandering round a large store in the City unaware that she had a small child of three in her care. Full time help was therefore again necessary.

This type of case is a strain on the home helper; frequent changes of helper are, however, not advisable because of the difficulty of getting the person concerned to accept a stranger into the house.

Waiting List. The list remained relatively static throughout the first nine months of the year. Strict limitation of help to all cases did not reduce the waiting list, as new cases were added daily. Frequent appeals were received from persons in need of help, general practitioners, welfare officers and others. This situation was eased somewhat during the last three months as the recruitment of helpers improved.

Administration and Staff. The absence of several members of staff for long periods due to illness, coupled with the resignation of two wages clerks and one clerk in the general office, caused considerable pressure on the remaining members of the central office staff, and temporary staff were employed until permanent clerks could be appointed. Due to the unusual nature of the work, it was not easy for inexperienced staff to deal speedily with their day to day duties, and consequently some of the work fell into arrears.

It was also necessary to loan one of the central office clerks to the Western district office, as clerical work had suffered in this district for which there is no general clerk. Since the opening of this office the district organiser and two caseworkers have had to deal with all clerical work as and when they could, usually before the office opened in the morning, and during the lunch hour.

Institute of Home Help Organisers' Examination. Three district organisers and one senior and one junior caseworker sat for the above examination in November 1961, when the three district organisers and the senior caseworker were successful in obtaining the Institute's Certificate. Six further members

of staff consisting of the Deputy Organiser, one district organiser, three senior caseworkers and one junior caseworker, sat the examination in November 1962 when five of them passed, the Deputy Organiser with distinction.

Finance. The income for the year showed a slight decrease. This reduction was caused through the new scale of assessment introduced in September, whereby a number of part cost cases became "Nil" under the new scale.

The increase in the number of full cost cases continued throughout the year.

No. of Helpers at 31st December							
	1962	1961	1960	1959	1958	1957	1956
Full-time	124	146	150	136	136	182	132
Part-time	330	304	308	325	327	333	295
Casual	19	20	2	12	8	6	15
TOTAL	473	470	460	473	471	521	442
Hours worked							
Weekly average ..	10,725	11,000	11,200	12,226	12,057	10,933	11,333
Result of Applications							
Help supplied ..	1,114	1,292	1,254	1,405	1,305	1,189	1,385
Awaiting help ..	27	46	39	43	42	24	69
Advance maternity bookings ..	36	55	49	48	39	42	42
Not qualifying ..	42	32	33	36	22	19	25
Cancelled or arranged own help ..	465	471	494	487	512	537	662
TOTAL	1,684	1,896	1,869	2,019	1,920	1,811	2,183

Analysis of Cases Assisted and Payments made

	Full cost	Part cost	Nil	Total
Old Age Pensioners:				
Chronic illness	256	257	2,344	2,857
Acute illness	3	1	3	7
Others:				
Chronic illness	15	8	50	73
Blind	—	—	4	4
Acute illness	64	12	33	109
Maternity	100	29	16	145
Tuberculosis	2	2	16	20
Social cases	1	—	1	2
TOTAL	441	309	2,467	3,217*

* Includes 2,103 cases carried forward to 1962.

ANNUAL EXPENDITURE AND INCOME SINCE INCEPTION

Financial year	Expenditure	Income
	£	£
1944/5 ..	50	15
45/6 ..	1,343	725
46/7 ..	2,647	1,408
47/8 ..	5,363	2,603
48/9 ..	10,591	3,639
49/50 ..	17,672	4,621
50/1 ..	27,191	3,369
51/2 ..	46,966	4,359
52/3 ..	78,342	5,249
53/4 ..	93,423	5,445
54/5 ..	99,347	5,895
55/6 ..	106,444	6,818
56/7 ..	115,174	8,369
57/8 ..	120,204	8,184
58/9 ..	133,328	9,391
59/60 ..	133,627	8,405
60/1 ..	133,796	8,199
61/2 ..	143,058	9,427
*62/3 ..	137,945	9,172

* Approximate actual

MENTAL HEALTH SERVICE

General. Though two years have passed since the coming into operation of the Mental Health Act 1959, various factors continued—fortunately in a lessening degree—to delay its complete implementation.

Members of the public for example displayed some unwillingness to accept the mentally disordered within the community, as shown by the number of telephone calls from relatives and neighbours about the admission to hospital of persons whom psychiatrists considered suitable for care at home.

A proportion of general practitioners availed themselves of consultation with the hospital psychiatrists, but others continued, as in the past, to report their cases to mental welfare officers, in the expectation that they would take all the necessary action.

Thus it is that all new legislation, especially of the complexity of the Mental Health Act 1959, requires time to become fully effective.

There were still many subnormal persons awaiting hospital care when the year opened, though as the months passed it seemed that an increase in accommodation would provide for them early in 1963.

Mental deterioration occurring in old people continued to create many problems to which there is as yet no ready solution.

Visitors. During the course of the year, considerable outside interest was shown in the community care scheme operating in the City and among welcome visitors were the Minister of Health for Queensland, Australia, and representatives from other local health authorities.

Mental Illness. Admission to Hospital. There was again a reduction in the number of cases referred with a view to hospital admission from 1,088 in 1961 to 851 in 1962. This resulted mainly from the advantage of consultation between practitioner and psychiatrist. In actual work this reduction was welcome in that some of the measures of the Mental Health Act prescribed lengthened procedure for admission.

Whilst the growing immigrant population in the City did not show a higher incidence of mental illness than the average, those cases which did occur sometimes showed bizarre and difficult, and sometimes potentially dangerous, features.

“A young man, member of an immigrant family, took ill, was admitted to hospital and died. Other members of the family developed fears that this might also happen to them—an elder sister to such an extent that she became hysterical to the point of needing psychiatric care. The family doctor arranged for a bed in the mental hospital, and requested a mental welfare officer to arrange for admission, the woman being quite unable to co-operate on an informal basis. On arrival in the district, the mental welfare officer found some twenty coloured men in the street, apparently holding a prayer meeting. On the door of the house a large dark blue cross had been painted, and the staircase was packed with coloured men. Peering over the bannisters were a number of coloured women each with a blue cross painted on her forehead, and all praying in the manner of a Revivalist meeting. In the room where the sick woman was, the more intimate members of the family circle were gathered round a table holding hands and praying. They refused to allow any action to be taken by the mental welfare officer and it was apparent that an ugly situation could develop. The mental welfare officer withdrew, having ascertained that the husband was not present. The latter was fetched from work and interviewed in another house. He proved to be a very sensible man who agreed that his wife should be admitted to hospital for the necessary treatment and accompanied the mental welfare officer back to the home. Immediately the husband's decision was known, the mood of the other members of the family and friends changed dramatically and, from being opposed, the mental welfare officer suddenly found himself beset with far too many willing helpers. The patient was duly admitted to hospital, and made a marked improvement within a few days, following which she was discharged to the care of relatives who were arranging for her to fly home to the West Indies”.

Of 851 cases referred 478 were actually admitted to the hospital. Of these it was possible to persuade 259 to take advantage of informal admission, and of the remainder 139 had features of sufficient urgency to require action under Section 29 of the Act, whilst 77 were admitted for observation under Section 25. In no case was an application for treatment made under Section 26. Of the remaining 3, one was admitted on an order under Section 60, and two were admitted under section 136.

Community Care. Although illness among mental welfare officers reduced their effectiveness in community care for several months, the Mapperley Hospital team of four social workers was brought to full strength early in the year and it was possible to undertake more case work than in 1961. The case load had had to be curtailed to 778 cases at the end of 1961, but rose steadily throughout 1962, finishing at 953.

The finding of suitable employment continued to be one of the main functions, but some tightening of the labour market was noticed. Persistent efforts had to be made in some cases, and this often took longer than had been the case previously. Nevertheless, in no case where an ex-patient was in any degree employable, was it finally impossible to obtain a placement of some kind. By the year end 61 had been placed.

No less difficult was the search for living accommodation for those who had literally nowhere to go on discharge from hospital. By the year end 25 patients had been successfully placed in lodgings or rooms. This small total gives no indication of the effort demanded of the mental welfare officers and social workers in making these placements. It was not only a matter of merely finding vacant living accommodation, but in a great many cases of assessing the compatibility of ex-patient and landlady as it was not always felt safe to place the patient in the first available vacancy.

The above takes no account of the strenuous efforts made to re-integrate patients with their own family circle. This was always the first aim where the patient had been admitted from a family home but where quite often it was found that, possibly as a result of disturbing conduct prior to admission, the family circle had closed in to the exclusion of the patient. Such cases called for skilled work by the mental welfare officers to avert total rejection of the patient by the family.

During the year, the mental welfare officers and social workers together carried out 7,744 home visits and outside interviews, and it is interesting evidence of the way the mentally sick themselves quite freely availed themselves of the services of the department, when it is noted that 2,082 personal calls were made by patients to the Department.

Nuffield House. Details of the work of the Octagon Club in the prevention of mental deterioration in the elderly and in caring for some who would otherwise require to be in hospital appear on page 84.

Mental Subnormality. Admission to Hospital. There were no great problems in the field of mental subnormality although at the beginning of the year there was a considerable waiting list for hospital accommodation. A few beds became available during the year and, towards the end, admissions began to be made to newly available accommodation at both Aston Hall and Balderton Hospitals. It was anticipated that, by early in the new year, all cases having any degree of urgency would have been dealt with by admission to one or other of these two hospitals.

Short term care was again freely available and in all some 115 short term admissions were made. This method was used for two types of case; on the one hand for cases of sudden family

crisis such as the illness of the mother, and on the other, to afford temporary relief to the hard-pressed families of those where the real need was for as yet unavailable long term care. This form of care was most expensive in time and effort since the vacancies were obtained in hospitals varying from 15 to 40 miles from the City, with the necessity of providing transport and escort in every case for admission and discharge.

Community Care. On 1st January community care was being provided for a total of 913 mentally subnormal persons, increasing to 953 by the end of the year. Regular home visiting continued to be the basis of this work, enabling home conditions to be observed closely and suitable advice given to parents as necessary. Attempts were made to find suitable work for adults considered capable of undertaking gainful employment. In addition to those placed as a result of the close liaison that was maintained with the Ministry of Labour and the Youth Employment Service, 16 were placed by the action of mental welfare officers.

Whilst in the majority of cases subnormals are necessarily dealt with in the family setting, it is interesting to note that no fewer than 323 made personal visits to the office on their own behalf, a tribute to the good relationships which the mental welfare officers have been able to establish with their subnormal clients.

City Occupation Centre. The City Occupation Centre continued to be overcrowded, with 193 names on the register and it says much for the teaching staff that excellent work was done despite the difficulties this created. It was only possible to admit new cases when occasional vacancies occurred, and the waiting list at the end of the year was 92 urgently in need of admission.

The proposed extensions to training facilities will provide 50 places in a special care unit and a further 50 in an advanced training unit. In the first instance this will be brought about by the construction of a new infant section for the City Occupation Centre, as well as a special care unit, on a more central site, thus releasing space at the Centre for development of the adult training unit. At a later stage all the units at Bestwood Road will be transferred to the new site.

During the year, there were in the community 34 cases suitable for the special care unit and 13 cases for the advanced training unit, the other places to be filled by transfer of those at the moment on the registers of the City Occupation Centre. Certain cases attending the City Occupation Centre were felt to be more appropriate for hospital care and there was a prospect that suitable accommodation was about to become available for them.

Training for children continued along well established lines. The training of adult subnormals is still in the experimental stage and a variety of occupations was tried in the adult male workshop. Following last year's success in producing sufficient chain link fencing to re-fence the entire perimeter of the grounds surrounding the training centre, a market was sought for this commodity, in the production of which some of the older boys were becoming quite expert. The education authority became interested and took the entire production for use at schools. The youths employed on the machines were greatly stimulated by seeing their work collected by lorry and taken away for use elsewhere.

A special incentive pocket money scheme was devised on a points system which allowed for deductions for such factors as bad behaviour, lack of application to the task and poor co-operation with others. A similar scheme operated for the

women who assisted in the kitchen and the benefit was most marked. There was appreciation of the reason for deductions and, as a result, a great improvement took place in behaviour, personal appearance and general morale. Two of the women in the kitchen consistently gained full marks.

A dental inspection of children on the register and some on the waiting list of the City Occupation Centre was carried out during the year by the Principal School Dental Officer. Of 102 children inspected, 64 were found to require dental treatment. Only 2 have so far been treated, these being emergency extractions.

During the year, the Nottingham and District Society for Mentally Handicapped Children built a social and recreational centre on Edwards Lane, and named it Harpenden House after the home town of the founder of the movement, Mrs. Frydd. The Society offered the day time use of these premises to the Corporation as a possible means of extending Occupation Centre facilities and, thereby, reducing the waiting list. The premises were not suitable for use by a class of young children, but it was agreed that some 25 women could be withdrawn from the City Occupation Centre and suitably accommodated temporarily at Harpenden House. This arrangement, although fraught with many administrative difficulties, would make available more places for children in the City Occupation Centre and would considerably help to bridge the gap until the proposed extensions are ready for use. Subject to the necessary financial provision being made, this scheme will come into operation, on a temporary basis, in April, 1963.

Staff. This was a difficult year in that, for the first time since 1948, staff illness interfered seriously with the effective working of the Service. A total of 11 months was lost, principally owing to long spells of serious illness affecting two of the mental welfare

officers. These periods of sick leave extended over the summer holiday period when other mental welfare officers had arranged periods of their annual leave, with the consequence that, for a time, the staff was so reduced in numbers that only the most urgent work could be carried out, and a good deal of routine social work had necessarily to be postponed.

In February, a second mental welfare assistant commenced duty. During the period of staff shortage the two young assistants fully proved the value of such appointments. Under the guidance of the mental welfare officers, they were able to carry out a good deal of the essential case work of the sick officers and, by carrying out escort duties, were able to free the mental welfare officers for more specialised work.

It is recorded with pleasure that Mr. J. E. Westmoreland, M.B.E. Mental Health Officer, was appointed a member of the Council for Training in Social Work, constituted under the Health Visiting and Social Work (Training) Act 1962.

NUMBER OF PERSONS REPORTED AS MENTALLY ILL

				Under 65 years		Over 65 years		Totals
				M.	F.	M.	F.	
Reported by:—								
Police	..	..	..	49	38	5	20	112
Hospitals	..	..	..	40	50	17	34	141
Medical practitioners	..	..	..	69	79	63	130	341
Relatives	..	..	..	37	25	12	22	96
Others	..	..	..	38	40	12	71	161
TOTAL				233	232	109	277	851
Disposal:—								
Admitted under Sect. 25	..			21	37	6	13	77
„ „ „ 26	..			—	—	—	—	—
„ „ „ 29	..			57	56	5	21	139
„ as informal patient	..			74	66	49	70	259
Other admissions	..	..		1	1	1	—	3
TOTAL ADMITTED TO HOSPITAL				153	160	61	104	478
For community care	..	..		19	15	23	95	152
Not accepted	..	..		29	19	15	30	93
Referred to:—								
Welfare Services	..	..		—	2	1	11	14
Family doctor	..	..		18	17	6	23	64
O/P Clinic	..	..	..	12	17	1	1	31
Day Hospital	..	..		2	2	2	13	19
TOTAL				233	232	109	277	851

SUBNORMAL AND SEVERELY SUBNORMAL PERSONS

New Cases Reported	Males	Females	Totals
Reported by:—			
Local Education Authority ..	17	14	31
Medical practitioners	—	—	—
Police and courts	—	—	—
Other sources	25	28	53
	42	42	84
Disposal of cases:—			
Admitted to hospital	—	2	2
Attending Training Centre ..	6	2	8
Waiting list for Training Centre ..	8	4	12
Community care	28	34	62
	42	42	84

CITY OCCUPATION CENTRE

Analysis of trainees on the register on 31st December

Age Groups	Intelligence Quotients						Totals
	Below 30	30 to 40	41 to 50	51 to 70	71 to 80	Not tested	
FEMALES:							
Under 7 years ..	—	1	—	—	—	1	2
7 to 11 „ ..	—	3	2	—	—	8	13
12 to 15 „ ..	4	1	12	8	—	3	28
16 to 20 „ ..	2	4	10	3	—	1	20
21 to 39 „ ..	—	4	7	1	—	1	13
40 years and over	—	1	3	—	—	—	4
	6	14	34	12	—	14	80
MALES:							
Under 7 years ..	—	1	—	1	—	6	8
7 to 11 „ ..	1	2	8	2	—	11	24
12 to 15 „ ..	2	11	6	5	1	3	28
16 to 20 „ ..	3	9	2	9	—	2	25
21 to 39 „ ..	6	7	6	5	—	1	25
40 years and over	—	1	2	—	—	—	3
	12	31	24	22	1	23	113

PART III

ENVIRONMENTAL SERVICES

Caravan Sites and Control of Development Act 1960

Clean Air Act 1956

Factories Act 1961

Fertilisers and Feeding Stuffs Act 1926

Food and Drugs Act 1955

Housing Acts 1957-1961

Noise Abatement Act 1960

Nottingham Corporation Acts 1923-1952

Pharmacy and Poisons Act 1933

Prevention of Damage by Pests Act 1949

Public Health Acts 1936-1961

Rag Flock and Other Filling Materials Act 1951

Rent Act 1957

Shops Act 1950

Slaughter of Animals Act 1958

Slaughterhouses Acts 1954-1958

SANITATION

HOUSING

ATMOSPHERIC POLLUTION

FOOD SUPERVISION AND INSPECTION

SANITATION

There was no improvement in the staffing position in the Chief Public Health Inspector's Department. Two trainee inspectors were successful in obtaining the statutory qualification but their appointment as district public health inspectors did not offset three retirements which occurred during the year. It is inevitable that some work must suffer while there is such a shortage.

Only six Site Licences granted in accordance with the Caravan Sites and Control of Development Act 1960 were in force. One new licence, with conditions, was granted but a licence in respect of one site previously granted for a limited period was not renewed. Waste land in Lenton Lane was subject to misuse by itinerant caravan-dwellers throughout the year and inspectors were kept busy dealing with this recurring problem. Legal proceedings were taken against seven offenders but in many instances the caravans were removed from the land before a summons could be served.

During May the offensive trades of fat-extracting, fat-melting and tallow-melting from inedible material were removed from premises within the City to a new establishment outside the City boundary. This reduced the serious nuisance which troubled the residents of nearby houses for many years.

Although many complaints were received of nuisance from noise, ranging from noisy factories to noisy neighbours, none required action under the provisions of the Noise Abatement Act 1960. The ice-cream vendor who is permitted under the Act to sound his chimes between noon and 7 o'clock in the evening sometimes tried the patience of the public by the excessive use of the chimes.

WATER

The City's water supply was satisfactory in quality throughout the year. Supplies were adequate, apart from the necessity of imposing a ban on the use of hose pipes for car washing and garden watering during the summer months.

Bacteriological analyses of supplies from each source were undertaken monthly by the City Analyst, and, at those works where treatment was carried out, samples of water were examined both prior to and following such treatment. During the year 226 samples were taken and B Coli was absent in 200 mls. of all treated water put into supply. Of these samples, 48 were of water which was not subsequently treated, and in no case was B. Coli present in 100 mls. or less. In addition, samples were taken weekly, 970 in all, from the various sources, for bacteriological examination by the Public Health Laboratory.

Bacteriological examination of the water, as it left the consumer's tap, was continued during the year. For this purpose, 317 samples were taken at random and the results of the analyses, which were carried out by the Public Health Laboratory, were satisfactory in all but eight instances. In these eight, the initial unsatisfactory results proved, on investigation, to be due to contamination from the tap, the water supplied being satisfactory.

Chemical analyses were made monthly from each source, and the extent and results of these examinations are indicated by the findings for the month of December, 1962—see table.

The only water which had any plumbo-solvent tendency was the upland supply from the Derwent Valley Water Board, which provided about 25% of the needs of the Water Area. This tendency was counteracted by the automatic addition of lime to bring the pH value up to about 8.3.

The number of houses supplied in the City on 31st December, 1962, was 101,823, and the estimated population 314,360. All were supplied directly from the mains; four houses had no piped water supply.

Analyses from each source of supply												December, 1962	
	Basford Pumping Station	Bestwood Pumping Station	Boughton Pumping Station	Burton Joyce Pumping Station	Eastwood Filtration Works	Halam Pumping Station	Lambley Pumping Station	Markham Clinton Pumping Station	Papplewick Pumping Station	Rufford Pumping Station	Salterford Pumping Station		
				Boreholes 2, 3 and 4									
These samples contain per 1,000,000 parts:—													
	Water prior to treatment	Water prior to treatment	Water prior to treatment	Water not treated	Water prior to filtration	Water after filtration	Water prior to treatment	Water not treated	Water prior to treatment	Water after treatment	Water after treatment		
Total Solids dried at 180°C.	445.00	270.00	230.00	360.00	113.00	113.00	195.00	190.00	170.00	205.00	250.00		
Suspended Matter ..	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent		
Chlorides as chlorine ..	46.15	24.85	35.50	17.75	14.20	14.20	14.20	14.20	17.75	24.85	24.85		
Oxidised Nitrogen as nitrate	13.39	6.59	5.77	0.41	0.21	0.21	1.23	1.44	0.41	2.06	4.53		
Oxidised Nitrogen as nitrite	0.002	Absent	Absent	0.001	0.002	0.006	Absent	Absent	Absent	Absent	Absent		
Free and saline Ammonia ..	0.004	0.004	0.004	0.004	0.048	0.048	0.004	0.004	0.004	0.008	0.004		
Albuminoid Ammonia ..	0.004	0.008	0.008	0.008	0.024	0.024	0.004	0.004	0.004	0.004	0.004		
Temporary Hardness ..	160.00	85.00	110.00	185.00	19.00	15.00	120.00	115.00	140.00	75.00	55.00		
Permanent Hardness ..	176.00	87.00	74.00	91.00	37.00	37.00	4.00	13.00	12.00	45.00	73.00		
Oxygen absorbed in 4 hrs. @ 80°F. from N/80 KmnO4	0.00	0.00	0.00	0.00	0.55	0.44	0.00	0.00	0.00	0.00	0.00		
pH value ..	7.30	8.00	7.90	7.60	8.60	9.00	8.20	8.00	8.10	8.20	8.20		
Appearance ..	★	★	★	★	★	★	★	★	★	★	★		
Odour ..	None	None	None	None	None	None	None	None	None	None	None		
Taste and Colour ..	Normal	Normal	Normal	Normal	Normal	Normal	Normal	Normal	Normal	Normal	Normal		
Heavy Metals ..	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent		
Free Chlorine ..	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	Absent	0.10		

★ Clear and bright

SWIMMING-BATHS

There were ten public swimming-baths in the City, seven being indoor and three open-air pools. Six of the indoor baths were open for swimming summer and winter. A total of thirty-six samples of water was sent to the City Analyst for bacteriological and chemical examination and only one showed the water to be under-chlorinated.

In addition, two samples of water taken from the paddling pool at Bulwell Lido were satisfactory.

The children's paddling pool at Highfields Park remained closed throughout the year as the water in the Tottle Brook which supplies the pool was proved to be unsatisfactory.

SEWERAGE

Apart from certain areas where a total of 80 premises are connected to cesspools, the whole of the drainage of the city is on the combined or separate systems of main drainage.

The conversion of the majority will require large capital schemes and may have to await general redevelopment of the areas in which they are located.

The main problems requiring attention are:—

- (a) The flooding of areas by watercourses of inadequate capacity. It is hoped that Ministry authority will be given for a start to be made on the River Leen Improvement Scheme early in 1963.
- (b) The inadequacy of certain of the main outfall sewers and the capacity of the main pumping station at Sneinton which deals with over one-third of the sewage in the City. A scheme has now been submitted to the Ministry for a new and enlarged station here.
- (c) The replacement of sewers which have become defective due either to mining subsidence and/or old age. A number of small schemes for the replacement of defective sewers are carried out each year.

Progress is being maintained on the improvement of the whole drainage system of the City, and when the River Leen Scheme is carried out the major cause of flooding in the City should be alleviated.

SEWAGE PURIFICATION

The average daily flow of sewage and industrial wastes treated was 26·9 million gallons, derived from a population of 415,952 people resident in Nottingham and adjoining areas. Expressed chemically, industrial wastes were equivalent to the domestic sewage from a further 217,000 persons.

Primary sewage solids, and surplus activated sludge from the aeration plant commissioned in December 1960, were digested anaerobically prior to discharge to drying beds and farm land. Gas derived from this digestion process totalled 146,530,500 cubic feet, and constituted the major source of fuel supply to the works' power station.

All sewage received was given complete treatment before discharge to the River Trent, and no complaints were received relative either to works operation or sludge disposal practices.

SHOPS ACT

An application was granted to the organiser of a public exhibition for an extension of hours for retail trade or business which was subsidiary or ancillary to the main purpose of the exhibition.

Statutory closing hours were, generally, well observed by shopkeepers.

PUBLIC HEALTH ACTS

Workplaces. Action was taken at five workplaces to secure an improvement in the sanitary accommodation.

Common Lodging Houses. The two establishments in the City run by the Corporation and the Salvation Army respectively, were visited on nine occasions, and were satisfactorily conducted.

Canal Boats. The canals and other navigable waters within the City were visited on twelve occasions and sixteen boats were inspected; there were no women or children aboard the boats.

It was not necessary to serve a notice for any contraventions, no case of infectious disease was reported, nor was it necessary to detain any boat for cleansing or disinfection.

The registration of one boat was cancelled during the year and the total number of boats now registered by the authority is 35.

KNACKERY

There is one knackery of modern construction in the City. It is situated on land owned by the Corporation at the Eastcroft Depot; the premises were supervised and found to be satisfactory.

RAG FLOCK AND OTHER FILLING MATERIALS

Licences and registrations in force:—

Upholstery premises registered	..	..	28
Licences to store rag flock	..	..	2

A total of fifty-six samples of various filling materials was taken and submitted for analysis and the following samples were found to be unsatisfactory:—

	Action taken
Sample (No. 43)Woollen Mixture Felt had less than 60% wool content.	Followed by formal sample (No. 46) which proved to be genuine.
Sample (No. 52) of Fleece Wool was apparently unprocessed virgin wool and failed to satisfy the standards applicable under the Act.	Confirmed by formal sample (No. 53) Warning letter from the Town Clerk to suppliers.

MEASURES AGAINST RODENT AND INSECT PESTS

The great increase in the rat population noted by some rural authorities was not experienced in the City. Although there was some increase in the number of infestations dealt with during the first half of the year most of them were of a minor nature. There is no doubt that the readiness of the public to seek the help of the Department contributed to the success of control measures. Suspected infestations were notified without delay so that they could be dealt with before the rats spread to neighbouring premises.

It was not necessary to serve any notices under the Prevention of Damage by Pests Act 1949.

There was less nuisance from most species of insect pests. The number of bug infestations treated was the lowest since 1958 while the number of premises treated for fleas was the lowest recorded.

The number of dwellinghouses treated for the control of the "Black Garden" ant increased. It is probable that the number of complaints increased because the tenants know that the Department can help and because of improving standards of hygiene. More people now endeavour to eradicate a nuisance that they would have tolerated in the past. The "Black Garden" ant is one of the most difficult pests to eliminate and, in most instances, the householder had taken unsuccessful control measures before seeking help.

Earwigs were a serious nuisance in some areas on the outskirts of the City during the autumn and vast numbers invaded houses and penetrated to all parts of the buildings. The insecticides first used were not very effective, although a wide range of materials and methods were tested. Later, trials with recently-developed insecticides showed promising results and will be adopted in the future should the need arise.

Rodent and Insect Control			1962	1961	1960	1959	1958	1957
Properties surveyed	..		4,867	6,241	5,763	6,508	7,120	6,310
Infestations dealt with:								
rats	..	..	1,487	1,288	1,210	1,397	1,194	1,660
mice	..	..	600	575	543	487	466	536
insects	..	..	1,078	1,230	1,273	1,488	1,306	833
Total visits	..	..	14,400	13,650	14,195	15,453	17,694	17,426

An indication of the variety of insects received by the Pests Officer for identification included the following:—

Beetles

Anobium Punctatum	..	2
Attagenus Pellio	..	6
Attagenus Piceus	..	4
Carabid	..	6
Dermestes Lardarius	..	1
Lathridius Nodifer	..	1
Necrobia Rufipes	..	1
Niptus Hololeucus	..	2
Otiorrhynchus Singularis	..	2
Ptinus Tectus	..	3
Staphylinus Olens	..	3
Stegobium Paniceum	..	7
Tenebrio Molitor	..	4

Fleas

Ctenocephalides Felis	..	2
Pulex Irritans	..	1

Flies

Eristalis Tenax	..	1
Thaumatomyia Notata	..	3

Miscellaneous

Bryobia Praetiosa	..	..	4
Sirex Gigas	..	..	1
Springtail	..	..	1

Larvae

Attagenus Pellio	..	..	3
Anopheles Claviger	..	..	2
Calliphora Erythrocephala	..	..	2
Deilephila Elpenor	..	..	1
Dermestes Lardarius	..	..	1
Hofmannophila Pseudospretella	..	..	2
Musca Domestica	..	..	1
Orgyia Antiqua	..	..	1
Phymatodes Testaceus	..	..	1
Tenebrio Molitor	..	..	1

Fragments

Moth and beetle in bread
Fly pupae in milk bottle
Fly in corned beef

HEATING APPLIANCES AND FIREGUARDS

The Oil Heater Regulations 1962 made under the provisions of the Consumer Protection Act 1961, came into operation on the 1st January, 1962. The Regulations imposed requirements in relation to domestic space heaters which burn paraffin oil, designed to ensure their safety in use. All new heaters on display conformed to the Regulations.

No portable gas or electric fires on sale in retail shops were found to contravene the Heating Appliances (Fireguards) Regulations, 1953.

FACTORIES ACTS

PREScribed PARTICULARS ON THE ADMINISTRATION OF THE FACTORIES ACT, 1937.

PART I OF THE ACT.

1. **Inspections** for the purposes of provisions as to health (including inspections made by public health inspectors).

Premises (1)	Number on register (2)	Number of		
		Inspections (3)	Written notices (4)	Occupiers prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	165	63	2	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	1,896	585	87	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	—	7	5	—
TOTAL	2,061	655	94	—

2. Cases in which **Defects** were found.

Particulars (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	To H.M. Inspector (4)	By H.M. Inspector (5)	
Want of cleanliness (S.1)	9	7	—	4	—
Sanitary conveniences .. (S.7):					
(a) Insufficient ..	7	5	—	11	—
(b) Unsuitable or defective ..	99	72	—	20	—
(c) Not separate for sexes.. ..	15	4	—	2	—
Other offences against the Act, (not including offences relating to outwork)	39	18	—	2	—
TOTAL	169	106	—	39	—

PART VIII OF THE ACT

OUTWORK

SECTION 110.

Nature of work	No. of out-workers in August list required by Section 110 (1) (c)		
	1962	1961	1960
Wearing apparel, making, cleaning etc.	969	986	978
Lace, lace curtains and nets	724	733	853
Nets other than wire nets	77	76	112
Household linen	37	40	48
Carding, etc., of buttons, etc.	30	35	29
Paper bags	5	6	5
Curtains and furniture hangings	1	1	1
TOTAL	1,843	1,877	2,026

SECTION 111.

No instances of work in unwholesome premises were found; no notices were served, nor were any prosecutions undertaken.

INFORMAL NOTICES	1962	1961	1960	1959	1958
TOTAL NO. COMPLIED WITH ..	5,001	4,698	5,981	6,399	7,116

	Nuisances remedied				
	1962	1961	1960	1959	1958
Additional water-closets—provision	28	33	24	4	9
Closets—cleansing	8	3	9	6	7
Courts, yards and passages:—					
paving	—	—	1	1	10
cleansing	12	14	13	4	18
repair	158	232	262	343	299
Drains—clearance	237	149	157	191	78
repair	153	196	117	257	226
Dustbins—provision	695	768	876	1,027	1,406
Factories with mechanical power ..	65	36	54	34	5
Factories without mechanical power	2	—	2	2	6
Houses—filthy	20	19	17	17	9
Houses-let-in-lodgings	15	19	42	13	
Nuisance from—pigs	—	—	3	1	—
fowls	3	2	2	5	5
other animals	6	2	7	2	6
accumulation of refuse ..	88	99	82	68	56
Panterpits—abolition	—	2	—	—	9
Tents, vans and sheds	49	30	13	34	72
Water-closets—clearance	14	34	43	11	59
repair	1,343	716	853	1,425	1,086
Workplaces	7	1	7	8	6
Miscellaneous nuisances	36	21	24	69	45
TOTAL	2,939	2,376	2,608	3,520	3,419

	Housing defects remedied				
	1962	1961	1960	1959	1958
Coppers	5	5	4	11	21
Fireplaces	131	225	268	295	256
Floors and ceilings	519	596	686	732	758
Rainwater conductors	956	972	964	653	1,303
Roofs	1,464	1,292	1,753	1,492	1,847
Sinks—provision	21	75	59	28	30
repair	90	110	149	191	189
Walls	772	1,001	1,031	1,248	1,200
Water pipes and fittings	47	33	28	80	87
Windows	978	994	1,262	1,331	1,187
Others	1,456	1,279	1,815	1,967	1,420
TOTAL	6,439	6,582	8,019	8,028	8,298
Number of defective houses dealt with	2,622	2,500	3,371	3,144	3,719

STATUTORY NOTICES

Enactment	Complied with				
	1962	1961	1960	1959	1958
Public Health Act, 1936					
Sect. 39 Drainage	370	285	419	364	315
„ 44 Inadequate closet accom- modation	9	8	8	7	5
„ 45 Closets	22	11	13	16	10
„ 56 Paving of courts, yards and passages, dwelling- houses	273	445	636	519	176
„ 75 Dustbins	169	199	323	342	316
„ 83 Dirty houses	—	—	—	2	6
„ 92 Houses	161	149	171	53	53
„ 287 Notice of entry ..	—	4	2	3	6
Public Health Act, 1961					
Sect. 17 Stopped-up drains ..	137	—	—	—	—
Nottingham Corporation Act, 1923					
Sect. 73. Repair of water-closets	158	89	164	272	210
Nottingham Corporation Act, 1952					
Sect. 72 Cleansing and repair of drains, water-closets, and soil pipes ..	64	138	148	130	92
„ 80 Repair of houses ..	12	3	4	—	—
Housing Act, 1957					
Sect. 9	540	561	701	777	889
TOTAL	1,915	1,892	2,589	2,485	2,078

Consequent upon the failure of owners to comply with statutory notices, the Corporation ordered work on private contractors and recovered expenses incurred in 398 cases as follows:—

ACT	1962	1961	1960	1959	1958
	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
Nottingham Corporation Act, 1923, Section 73 ..	56 2 4	45 14 1	92 16 3	211 12 6	140 10 3
Nottingham Corporation Act, 1952, Section 72 ..	88 7 11	123 5 11	156 0 7	137 4 7	145 0 3
Nottingham Corporation Act, 1952, Section 80 ..	71 16 11	4 13 7	28 11 6	— — —	— — —
Housing Act, 1957, Sec- tions 9 and 10 ..	984 13 0	1,797 1 4	1,735 14 7	2,155 13 4	2,634 18 6
Public Health Act, 1936—Section 39 ..	174 9 8	173 11 9	211 19 11	159 14 8	281 16 8
„ „ „ 44 ..	139 1 0	134 6 7	104 2 6	181 3 2	14 12 8
„ „ „ 45 ..	7 14 10	15 15 10	4 3 0	4 16 0	6 0 3
„ „ „ 56 ..	248 12 0	1,089 9 3	688 7 4	442 9 4	949 1 6
„ „ „ 92 ..	— — —	— — —	— — —	2 9 1	— — —
Act, 1961—Section 17 ..	100 9 0	— — —	— — —	— — —	— — —
	1,871 6 8	3,383 18 4	3,021 15 8	3,295 2 8	4,172 0 1

The cost of new dustbins supplied by the Corporation where owners or occupiers had not complied with notices served and where steps were taken to recover this amount was £98. 13s. 3d.

HOUSING

Further progress was made in slum clearance by the demolition of 535 houses in various parts of the City.

The representation of 413 houses at the end of the year marked the end of the first major phase of post-war representation of unfit houses. The total number of houses so dealt with since 1955 was 4,385.

In November the City Council made a Compulsory Purchase Order in respect of 303 unfit houses in Old Basford and approved proposals for the redevelopment of the sites. Towards the end of the year the Minister of Housing and Local Government confirmed the Compulsory Purchase Order made the previous year which will involve the clearance of 281 unfit houses in New Basford.

During the period of re-housing tenants from unfit houses the vacated properties quickly became the subject of much damage and misuse by vandals. Vagrants used some of them for sleeping purposes, refuse was deposited in them and drains were damaged, creating nuisances which not only affected remaining tenants but the district as a whole. Prompt demolition or effective sealing off of the premises appears to be the only protection against such hooliganism.

The powers contained in the Housing Act, 1961, to deal with unsatisfactory conditions in houses in multiple occupation were supplemented in May by the issue of The Housing (Management of Houses in Multiple Occupation) Regulations 1962. Briefly,

the Act enables the local authority to require the owner of such houses to provide reasonable amenities—water supplies, sanitary accommodation, washing facilities, etc., and suitable means of escape in case of fire, and to take steps to reduce overcrowding. The Regulations also empower the local authority to make a Management Order in respect of any such house, after which the Manager must comply fully with the requirements of the Regulations which deal with the proper cleanliness and repair of those parts of the premises used in common.

There are many houses in multiple occupation in the City where the living conditions are far from satisfactory as regards amenities and maintenance; inspection of these premises was, therefore, commenced to secure compliance with the new legislation. The execution of works of improvement often necessitates a reduction in the number of families or individuals occupying a house. Moreover, in some cases, the occupants have to find alternative accommodation where the owner prefers to revert to a single letting rather than incur expense in complying with a statutory notice. To prevent hardship and to allow for the re-arrangement of lettings, progress was necessarily slow, but a systematic inspection of houses in multiple occupation will continue in an endeavour to provide reasonable conditions for those who must live in such lodgings.

The Landlord and Tenant Act, 1962, which came into force on the 1st November, will be very useful in housing work, as it requires any landlord who lets residential accommodation on a weekly basis to provide a rent-book which must contain his name and address. Sometimes the “elusive” landlord is the cause of much frustration and delay.

It will be seen from the following table that the Rent Act, 1957, was little used so far as Certificates of Disrepair were concerned:

not only have few tenants made use of their rights under the Act but it will be noted that only one landlord applied for cancellation of a Certificate in the course of the year.

Certificates of Disrepair	1962	1961	1960	1959
Rent Act, 1957:				
Part I. Applications for Certificates of Disrepair:				
1. No. of applications for certificates ..	23	18	46	116
2. „ „ decisions not to issue certificates ..	3	3	3	4
3. „ „ „ to issue certificates:				
(a) in respect of some but not all defects ..	13	12	24	82
(b) „ „ „ all defects	7	3	19	29
4. No. of undertakings given by landlords	10	12	33	85
5. „ „ „ refused	—	—	1	1
6. „ „ certificates issued	2	7	11	29
Part II. Applications for cancellation of Certificates:				
7. Applications by landlords for cancellation of certificates	1	7	18	41
8. Objections by tenants to cancellation of certificates	—	1	8	20
9. Decision to cancel in spite of tenant's objection	—	—	5	3
10. Certificates cancelled by local authority ..	1	5	15	36

WOMEN HOUSING OFFICERS

A staff of four women housing officers made 15,759 visits to houses on Corporation estates and in the course of their inspections reported 1,206 defects to the Estates and Housing Department. In addition these officers visited 236 houses situated in areas the subject of Clearance Schemes prior to the rehousing of the tenants and, where necessary, took steps to prevent the re-infestation of the new houses by the transmission of vermin.

	1962	1961	1960	1959	1958
INSPECTION OF DWELLING-HOUSES					
Dwelling-houses inspected for housing defects under the Public Health or Housing Acts ..	5,264	5,263	6,135	6,201	7,696
Inspections made for the purpose ..	11,346	10,759	11,394	14,030	15,821
Dwelling-houses — included under sub-head above—which were inspected and recorded under the Housing Consolidated Regulations 1925 and 1938	601	536	831	789	985
Inspections made for the purpose ..	2,823	2,990	3,925	4,326	5,229
Dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	427	1,156	84	679	845
Dwelling-houses—exclusive of those referred to under the preceding sub-head—found not to be in all respects reasonably fit for human habitation	2,754	2,300	3,350	3,195	3,549
INFORMAL ACTION					
Defective dwelling-houses rendered fit in consequence of informal notices by the Local Authority or their officers	3,571	3,738	3,243	2,367	2,883
ACTION UNDER STATUTORY POWERS					
1. Proceedings under Sect. 9, 10 and 12 of the Housing Act, 1957.					
Dwelling-houses in respect of which notices were served requiring repairs	594	494	747	738	985
Dwelling-houses in which defects were remedied after service of formal notices:—					
1. By owners	476	450	598	666	725
2. By Local Authority in default of owners ..	64	111	103	122	164

	1962	1961	1960	1959	1958
2. Proceedings under the Public Health Acts.					
Dwelling-houses in respect of which notices were served requiring defects to be remedied	972	715	1,132	939	780
Dwelling-houses in which defects were remedied after service of formal notices:—					
1. By owners	594	524	769	643	185
2. By Local Authority in default of owners ..	210	337	524	283	359
3. Proceedings under Sect. 17 of the Housing Act, 1957.					
Dwelling-houses in respect of which demolition orders were made	7	—	—	3	—
Dwelling-houses demolished in pursuance of demolition orders	1	5	—	6	5
Closing Orders made	—	1	3	3	4

NUMBER OF INSPECTIONS OF HOUSES UNDER THE PUBLIC HEALTH AND HOUSING ACTS

	1962	1961	1960	1959	1958
First visits ..	12,596	10,759	11,394	14,030	13,963
Re-visits ..	11,780	11,519	13,771	14,862	16,945
TOTAL	24,376	22,278	25,165	28,892	30,908

ATMOSPHERIC POLLUTION

Emissions of dark smoke from chimneys are regulated by the Dark Smoke (Permitted Periods) Regulations, 1958, made under the Clean Air Act, 1956. Details of action taken to remedy smoke nuisance are as follows:—

	1962	1961	1960	1959	1958	1957	1956
Advisory visits including verbal cautions ..	124	140	188	217	272	390	378
Statutory notices served ..	2	4	8	3	2	1	3
Complaints investigated ..	138	145	143	161	184	151	137
Cases where work was executed for smoke and/or grit nuisance abatement ..	22	20	27	27	25	29	34

Nature of work carried out by owners

	1962	1961	1960	1959	1958	1957	1956
Chimney stacks erected or extended ..	5	6	5	5	3	7	8
Chimney stacks dismantled ..	—	—	3	1	1	5	2
Boilers converted from hand to mechanical stoking ..	4	4	6	2	7	12	16
Mechanical stokers overhauled or renewed ..	6	14	11	15	11	7	7
New boilers installed ..	14	21	11	12	8	11	10
Grit arresting apparatus installed ..	1	1	3	3	2	4	—
Conversion from coal to oil fuel or gas.. ..	3	7	6	10	13	6	10
Miscellaneous ..	3	6	7	2	6	8	9

MEASUREMENT OF ATMOSPHERIC POLLUTION

Seven stations, each equipped for the measurement of deposited solids from the atmosphere and of the sulphur content of the air, continued in operation. All of the stations, with the exception of Bulwell, also have the volumetric apparatus for the daily determination of smoke or suspended matter and sulphur dioxide.

Summary of Measurements

(a) Deposit gauges and lead peroxide apparatus.*

	Deposited Solid Matter in Tons per Square Mile			Lead Peroxide
	Annual	Max. monthly	Av. monthly	Max. figures mgm. SO ₃ per day per 100 sq.cm.
City Centre ..	210·47	32·03 : Jan.	17·54	5·00 : Jan.
Basford ..	212·78	41·28 : „	17·73	1·35 : „
Bulwell ..	189·20	21·87 : „	15·76	2·30 : Dec.
Meadows ..	254·91	43·40 : „	21·24	4·78 : „
Mapperley ..	131·99	20·50 : „	10·99	2·15 : Jan.
Wollaton ..	95·91	12·37 : Mar.	7·99	1·36 : Dec.
Clifton ..	145·22	24·82 : Jan.	12·10	1·76 : „
Av. for City..	177·21	—	14·76	—

* For full details see the following two pages.

MEASUREMENT OF ATMOSPHERIC POLLUTION
DEPOSIT GAUGES

Deposited solid matter in tons per square mile per month.

	City Centre			Basford			Bulwell			Meadows			Mapperley			Wollaton			Clifton		
	Insol- uble	Sol- uble	Total	Insol- uble	Sol- uble	Total	Insol- uble	Sol- uble	Total	Insol- uble	Sol- uble	Total	Insol- uble	Sol- uble	Total	Insol- uble	Sol- uble	Total	Insol- uble	Sol- uble	Total
January ..	23.96	8.07	32.03	33.11	8.17	41.28	15.51	6.36	21.87	34.30	9.10	43.40	15.60	4.90	20.50	8.24	3.37	11.61	20.26	4.56	24.82
February	10.21	4.84	15.05	12.50	3.83	16.33	12.76	4.47	17.23	12.30	5.60	17.90	6.70	2.97	9.67	5.13	2.57	7.70	6.28	2.50	8.78
March ..	11.07	4.84	15.91	16.24	3.73	19.97	13.78	3.81	17.59	15.90	5.44	21.34	9.44	2.90	12.34	9.57	2.80	12.37	9.49	3.04	12.53
April ..	14.10	6.88	20.98	13.77	5.37	19.14	13.98	5.14	19.12	21.22	6.80	28.02	8.80	3.57	12.37	6.90	3.60	10.50	10.10	3.48	13.58
May ..	13.65	5.25	18.90	13.47	3.57	17.04	14.61	5.80	20.41	16.17	4.84	21.01	7.24	2.56	9.80	6.47	2.63	9.10	10.77	3.88	14.65
June ..	9.32	2.44	11.76	12.24	2.10	14.34	11.00	1.99	12.99	8.90	5.57	14.47	10.47	1.43	11.90	5.27	1.17	6.44	6.99	1.52	8.51
July ..	10.70	2.77	13.47	10.04	2.80	12.84	10.18	3.74	13.92	10.40	3.60	14.00	5.04	2.59	7.63	4.67	1.87	6.54	11.31	2.53	13.84
August ..	8.40	6.82	15.22	9.83	4.63	14.46	7.92	5.77	13.69	12.87	7.20	20.07	7.17	4.27	11.44	5.97	1.73	7.70	6.82	4.53	11.35
September	11.13	7.77	18.90	9.70	6.64	16.34	9.38	4.87	14.25	13.30	7.94	21.24	6.74	4.00	10.74	3.37	3.40	6.77	7.87	4.19	12.06
October	9.35	4.71	14.06	6.90	4.67	11.57	7.95	3.41	11.36	10.37	5.27	15.64	5.13	2.33	7.46	2.93	1.52	4.45	4.32	2.53	6.85
November	11.00	5.14	16.14	11.80	4.30	16.10	8.54	4.67	13.21	10.50	5.13	15.63	6.47	3.33	9.80	5.20	2.73	7.93	7.36	3.04	10.40
December	11.10	6.95	18.05	9.10	4.27	13.37	7.56	6.00	13.56	13.68	8.51	22.19	5.10	3.24	8.34	1.53	3.27	4.80	4.59	4.26	8.85
TOTAL ..	143.99	66.48	210.47	158.70	54.08	212.78	133.17	56.03	189.20	179.91	75.00	254.91	93.90	38.09	131.99	65.25	30.66	95.91	106.16	40.06	146.22

ATMOSPHERIC SULPHUR

Expressed as milligrammes of Sulphate per day per 100 sq. cm. of lead peroxide

	City Centre	Basford	Bulwell	Meadows	Mapperley	Wollaton	Clifton
January ..	5.00	1.35	1.75	4.65	2.15	0.95	1.60
February ..	2.06	1.04	1.44	3.16	1.32	0.81	1.40
March ..	3.55	0.96	1.48	2.16	1.68	1.00	1.65
April ..	2.61	0.74	0.96	3.14	0.99	0.43	0.95
May ..	1.89	0.60	0.83	2.26	0.65	0.48	0.85
June ..	1.53	0.47	0.69	1.06	0.57	0.42	0.51
July ..	1.43	0.37	0.66	1.72	0.48	0.35	0.68
August ..	1.74	0.47	0.67	2.08	0.43	0.40	0.50
September	1.88	0.56	0.77	1.93	0.53	0.39	0.74
October ..	1.47	0.76	1.03	3.05	0.76	0.70	1.07
November..	4.00	1.13	1.58	3.75	1.35	1.00	1.60
December ..	4.50	1.27	2.30	4.78	1.15	1.36	1.76

(b) Volumetric Apparatus.

MONTH	Concentration of smoke expressed as Microgrammes per cubic metre of air																	
	CITY CENTRE			BASFORD			MEADOWS			MAPPERLEY			WOLLATON			CLIFTON		
	High	Low	Av.	High	Low	Av.	High	Low	Av.	High	Low	Av.	High	Low	Av.	High	Low	Av.
JANUARY	1,270	76	255	2,272	52	473	1,184	24	285	1,204	52	210	808	16	153	684	8	149
FEBRUARY	440	68	173	592	68	207	528	44	172	384	24	109	452	24	102	268	4	56
MARCH	540	100	273	1,012	160	372	604	64	304	504	44	172	684	52	214	444	16	127
APRIL ..	304	56	139	364	80	151	296	56	150	228	32	95	404	16	84	140	16	57
MAY ..	284	36	128	280	72	121	276	12	110	160	28	62	348	12	70	136	4	44
JUNE ..	336	12	71	222	8	62	192	12	50	100	12	35	60	4	21	52	4	20
JULY ..	248	12	72	140	16	58	168	4	63	84	8	36	80	4	32	84	8	33
AUGUST	208	12	60	48	4	21	212	28	67	172	24	50	188	8	37	80	4	21
SEPTEMBER	312	28	112	52	4	19	340	36	144	196	32	83	164	12	63	188	4	51
OCTOBER	552	28	232	536	0	104	424	12	185	480	32	220	436	16	181	360	4	83
NOVEMBER	1,172	100	340	1,560	144	476	1,004	48	315	972	36	250	1,248	12	229	724	16	174
DECEMBER	2,232	108	408	2,839	196	564	1,148	144	389	1,124	44	273	1,060	32	251	848	28	185
AVERAGES	658	53	189	827	67	219	533	40	186	467	31	133	490	17	121	334	10	83

Concentration of Sulphur Dioxide expressed as Microgrammes per cubic metre of air																		
MONTH	CITY CENTRE			BASFORD			MEADOWS			MAPPERLEY			WOLLATON			CLIFTON		
	High	Low	Av.	High	Low	Av.	High	Low	Av.	High	Low	Av.	High	Low	Av.	High	Low	Av.
JANUARY	1,389	100	308	1,356	121	307	1,037	59	254	1,134	80	243	295	6	75	1,022	58	222
FEBRUARY	301	5	152	399	47	164	442	21	190	320	22	122	189	7	51	310	37	113
MARCH	539	140	257	486	106	223	393	40	212	267	75	153	169	19	90	431	54	183
APRIL ..	226	37	121	195	50	115	301	41	144	178	33	85	111	6	45	147	34	88
MAY ..	178	59	108	208	53	115	204	60	122	122	23	76	94	17	49	139	43	85
JUNE ..	132	26	81	248	36	93	430	39	127	182	25	65	116	25	56	110	35	59
JULY ..	132	60	83	274	42	94	1,451	59	153	153	38	72	120	38	62	113	29	70
AUGUST	136	59	89	241	53	98	129	44	97	147	43	78	64	19	45	115	15	68
SEPTEMBER	177	30	144	239	13	104	214	50	123	169	33	99	192	32	64	186	29	95
OCTOBER	419	30	200	650	30	159	386	58	164	536	31	165	148	30	77	339	45	128
NOVEMBER	1,075	66	300	1,080	61	281	595	44	227	766	48	198	280	20	74	559	48	200
DECEMBER	1,443	68	356	1,525	124	386	996	87	319	1,143	62	262	406	20	98	955	72	252
AVERAGES	512	57	183	575	61	178	548	50	178	426	43	135	182	20	66	369	42	130

APPROVAL OF FURNACE INSTALLATIONS

The provisions of Section 3 of the Clean Air Act, 1956, made it an offence to instal a furnace in a building or in any boiler or industrial plant attached to a building, etc., unless it is, so far as practicable, capable of being operated continuously without emitting smoke when burning fuel of a type for which the furnace was designed.

In nine cases notices of proposals to instal were received and six plans and specifications were submitted and approved.

All plans and specifications submitted under Building Byelaws to the City Engineer's Department were examined and advice given on proposed fuel burning installations where necessary.

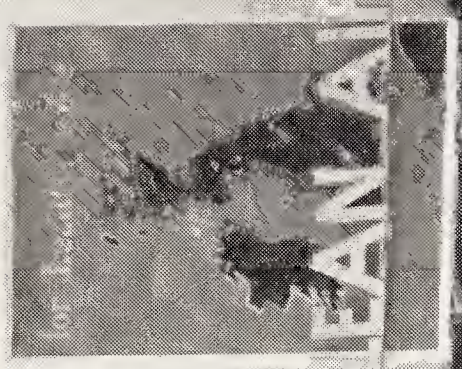
SMOKE CONTROL AREAS

In January Circular 4/62 was received from the Minister of Housing and Local Government in which local authorities in the "black areas" were asked to review their programme for establishing Smoke Control Areas with a view to increasing them and to prepare further programmes for making Smoke Control Orders in the five year period 1962-66. In response to this circular the Health Committee decided to add two further areas to their present programme, affecting parts of Basford and Bulwell, to be dealt with in 1965 and 1966 respectively. It was also decided to make the whole of the City subject to Smoke Control Orders by 1975.

SMOKE CONTROL



- 1 1960
- 2 1962
- 3 1963
- 4 1964
- 5 1965
- 6 1966
- 7 1967
- 8 1968



The programme

The present position is as follows:—

Nottingham (No. 1) Smoke Control Order, 1959

City Centre comprising 57·6 acres and affecting 845 premises.	Order came into force 1st December, 1960.
------------------------------------------------------------------	----------------------------------------------

Nottingham (No. 2) Smoke Control Order 1961

Area of the City south of the River Trent comprising 2,273·8 acres and affecting 7,665 premises.	Order came into force on 1st November, 1962.
--------------------------------------------------------------------------------------------------------	-------------------------------------------------

Nottingham (No. 3) Smoke Control Order, 1961

An extension of the City Centre Area comprising 112·9 acres and affecting 1,529 premises.	Order confirmed and will come into force on 1st September, 1963.
-------------------------------------------------------------------------------------------------	------------------------------------------------------------------------

In November, the City Council made Smoke Control Order, No. 4 which affects an area to the south west of the City involving part of Dunkirk, Lenton Abbey and part of the Wollaton area comprising 2,480·2 acres and including 4,786 premises. It is anticipated that the order will come into operation towards the end of 1963.

FOOD SUPERVISION AND INSPECTION

FOOD HYGIENE

Regular inspections of premises where food was prepared, stored or sold were made to ensure compliance with the Food Hygiene (General) Regulations 1960. From such visits it was apparent that some food handlers were not aware of their responsibilities to the public and were quite ignorant of the danger to health which may arise from some of their personal unhygienic practices—licking fingers before picking up wrapping paper, failure to wash hands as often as necessary and the use of an “all purpose” cloth for wiping counters, shelves and utensils.

There was a marked increase in the development of the supermarket and the smaller self-service store. From a food hygiene point of view there was much to commend the display of pre-packed foods only, provided due care was taken to secure a proper rotation of frozen and other perishable foodstuffs. An unsatisfactory feature of supermarkets, however, arose from the provision, for the use of customers, of trolleys which were often used to carry young children as well as the food purchases. The use of such trolleys in this way, which may have become fouled by a soiled napkin, to hold even wrapped food is undesirable. Customers could do much to encourage shopkeepers by refraining from handling unwrapped food on display and by not taking their dogs into food shops, with less consequent risk of contamination of food.

Owing to serious contraventions of the Food Hygiene Regulations the occupier of premises registered for the preparation and manufacture of Continental sausages was called before the Health Committee to show cause why they should not cancel the

registration. An offer to carry out considerable works of improvement within a period of three months was accepted and as the works were completed it was decided not to cancel the registration.

Proceedings were instituted in the following cases in respect of offences against the Food Hygiene Regulations:—

- | | | |
|-----|--------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| (a) | Failure to protect food from contamination and to keep the premises and equipment clean at a grocery shop. | Owner fined a total of £22. 0s. 0d. |
| (b) | Failure to maintain a van used for the carrying of meat in a cleanly condition. | Owner fined a total of £25. 0s. 0d. plus £5. 5s. 0d. costs. |
| (c) | Failure to provide hot water to the wash-hand basin and to keep the premises and equipment clean at a social club. | Owner fined a total of £25. 0s. 0d. plus £3. 3s. costs. |
| (d) | Failure to maintain a supply of hot water and to keep the premises in a satisfactory state of repair at a cafe. | Prosecution pending. |

Foreign Matter in Food. The number of complaints of the purchase of food that contained foreign matter or was otherwise unsuitable for human consumption, was eighteen. They concerned the presence of :—

piece of cloth in a fruit loaf;
 mouse droppings in a loaf of bread;
 fly in a packet of frozen peas;
 screw in a chocolate gateau;
 piece of cloth in a loaf of bread;
 string in a loaf of bread;
 screw in a fruit pie;
 thumb nail in frozen peas;
 wasp in a jar of honey;
 dirt in a cream biscuit;
 metal tag in a chicken and veal pie;
 „ in a loaf of bread;
 solder in a tin of sago;
 moth and beetle in a loaf of bread;
 mould on a loaf of bread;
 „ „ Cornish pasties;
 bristle in a chocolate biscuit; and a
 matchstick in a loaf of bread.

Legal proceedings were instituted in three instances and in each case the manufacturers were fined £5. 0s. 0d.

In the course of 6,108 visits to various food premises it was necessary to draw attention to 470 defects and contraventions of the Regulations. Requirements, including those outstanding from 1961, were met in 386 cases.

Food Premises Supervised	1962	1961	1960	1959	1958
Grocers and provision dealers including off-licence premises ..	1,176	1,247	1,251	1,229	1,248
Hotels, public-houses and clubs ..	435	430	427	433	435
Sweet shops	403	401	408	391	400
Butchers and meat products manufacturers	363	395	403	435	451
Fruit and vegetable dealers ..	355	367	371	378	388
Factory canteens, etc. ..	246	284	255	232	231
Restaurants, snack-bars, etc. ..	226	233	230	227	218
Food-stalls in markets:					
Wholesale	42	42	42	43	43
Retail	108	108	108	99	99
Fried fish and chip shops ..	135	133	138	142	144
Bread, pastry and confectionery dealers, including bakehouses ..	120	145	141	148	159
Wet fish, poultry, game, etc., dealers	71	59	59	58	65
School kitchens	65	59	59	56	56
Wholesale food dealers	47	48	46	48	47
Mobile food shops	43	30	24	27	31
Self-service stores (other than supermarkets)	28	—	—	—	—
Supermarkets	17	—	—	—	—
Ice-cream manufacturers	10	13	13	14	18
Dairies	5	5	5	5	5
Miscellaneous	63	67	71	89	91
TOTAL	3,958	4,066	4,051	4,054	4,129

Premises registered under Sect. 16, Food and Drugs Act, 1955	
Premises used for the—sale of ice-cream	1,303
manufacture of ice-cream	10
preparation or manufacture of sausages or potted, pressed, pickled or preserved food ..	355
TOTAL	1,668

The number of inspections of registered premises was 1,515.

FOOD SAMPLING

A total of nineteen samples of food was sent for bacteriological examination comprising seventeen samples of salami sausage and two of potted meat. All the samples were reported as being satisfactory.

Samples were taken for chemical analysis as follows:—

Formal	..	..	503	Analysed by City Analyst.
Informal	..	..	498	do.
„	Milk	..	493	Tested by Inspector.
			<hr/> 1,494 <hr/>	

Of the samples taken formally one was found to be not genuine. A confection sold as “Cream Horns” was found to contain only imitation cream. The manufacturer/retailers were prosecuted and a fine of £25 with £6. 8s. 0d. costs was imposed.

Informal samples were found to be in some respects unsatisfactory in forty-four cases, following which letters were sent to the sellers or manufacturers. Examples were:—

Pork dripping contained excess moisture in form of jelly.

Can of yellow plums in syrup had a “filled” weight deficiency.

Cranberry sauce contained colouring matter not declared.

Pork sausage meat contained only 51% meat.

Imported crab paste had a deficiency in crab meat.

Potato crisps were described as “starch-reduced” which was misleading.

Several pre-packed foods were not satisfactorily labelled.

Sampling of MILK and ICE-CREAM—see also pages 147 and 149.

THE MEAT SUPPLY

All slaughtering in the City was carried on in the public slaughterhouse owned by the Corporation where all the meat was inspected before leaving the premises. In addition regular visits were made to retail butchers' shops and warehouses to inspect meat brought into the City from elsewhere.

Transport. All the vehicles used for the transport of meat were inspected regularly, both at the public slaughterhouse and at the time of delivery of meat and offals to the retail butchers' shops. Verbal warnings were necessary in a few cases in order to secure improvements but in one case the owner of a meat-van was prosecuted for carrying meat in a vehicle that was not clean, and was without duck-boards.

Disposal of Condemned Food. All meat and offals found on inspection to be unfit were removed by approved firms from the slaughterhouse for manufacture into animal feeding stuffs and fertilisers. Other foodstuffs were disposed of by the Corporation's Cleansing Department in controlled refuse tips.

For details of unsound food surrendered see page 152.

**CARCASES OF MEAT INSPECTED
and
CARCASSES CONDEMNED**

	Cattle exclud- ing Cows	Cows	Calves	Sheep and Lambs	Pigs	Total
Number killed and in- spected	15,421*	4,009	2,679	60,407	27,318	109,834
All Diseases except tuberculosis and cysticerci:						
Whole carcasses condemned ..	5	16	21	139	103	284
Carcases part (or organ) condemned ..	4,380	3,075	1	1,340	5,069	13,865
Percentage affected ..	28·43	77·10	0·82	2·04	18·90	—
Tuberculosis only:						
Whole carcasses condemned ..	—	1	—	—	2	3
Carcases part (or organ) condemned ..	32	19	—	—	393	444
Percentage affected ..	0·21	0·50	—	—	1·45	—
Cysticercosis:						
Carcases part (or organ) condemned ..	353	87	—	—	—	440
Carcases submitted to treatment by refrigeration ..	35	4	—	—	—	39
Generalised and totally condemned ..	—	—	—	—	—	—

★ Bulls 15: bullocks 8,244: heifers 7,162.

THE MILK SUPPLY

REGISTRATIONS

The conditions under which milk was produced, stored, treated and distributed were regularly examined to ensure that the statutory requirements applicable to the trade were observed.

REGISTRATIONS AT 31ST DECEMBER	1962	1961	1960	1959	1958	1957
Processing dairies	3	3	4	3	4	4
Distributors operating from wholesale dairies	4	4	8	8	7	8
Distributors—shopkeepers	734	703	630	666	660	630

LICENSING

THE MILK (SPECIAL DESIGNATION) REGULATIONS, 1960

LICENCES GRANTED	1962	1961	1960	1959	1958	1957
Dealers'—to pasteurise	3	3	4	4	4	4
to sterilise	3	3	4	4	4	4
to sell T.T. milk ..	734*	214	64	157	81	64
to sell pasteurised milk		537	441	615	514	441
to sell sterilised milk		636	696	782	764	696

* Composite licences now issued.

SAMPLING

BACTERIOLOGICAL EXAMINATION.

Examination for Tubercle Bacilli. As only one positive result occurred during the last five years in biological testing of raw milks, it was decided to limit testing to farm-bottled milks. These are now almost non-existent in the area and no samples were submitted during the year.

Tuberculin Tested Milk (Pasteurised). A total of 311 samples was subjected to the Methylene Blue Test; only three failed to satisfy the test.

Pasteurised Milk. Samples totalling 350 were subjected to the Methylene Blue Test and seven failed to satisfy the test.

All samples of pasteurised milks tested were also subjected to the Phosphatase Test to determine the efficiency of the process and 652 proved to have been satisfactorily treated.

Sterilised Milk. A total of 144 samples processed under licence was obtained for examination; all satisfied the statutory turbidity test.

CHEMICAL EXAMINATION.

Of those samples examined by the Public Analyst during the year, particulars were as follows:—

Total milk samples examined	..	488
Average fat content	.. ..	3·872%
Average solids-other-than-fat content		8·738%

(The standard for milk is “fat” 3·0% and “solids-other-than-fat” 8·50%).

Of the 493 informal samples subjected to the Gerber Test by the inspector, 45 or 9·1% were unsatisfactory.

ACTION TAKEN ON UNSATISFACTORY MILK SAMPLES

<i>Samples taken formally and found not genuine</i>	<i>Action Taken</i>
8 samples from 6 producers were deficient in milk-fat content.	Letters from Chief Public Health Inspector to producers.
37 samples from 19 producers were deficient in solids-not-fat content.	do.
8 samples from 6 producers were deficient in milk-fat and milk solids-not-fat content.	do.

One sample sold as Tuberculin Tested Milk (Pasteurised), on being subjected to the phosphatase test, was found to be raw, non-pasteurised milk. The producer/retailer was prosecuted and fined £10 with 30/- costs.

Five farm milks in churns were sampled on delivery at a City dairy and four were found to contain added water in amounts varying from 12% to 37%. One churn was also deficient in fat content. The producer was prosecuted and a fine of £25 with £12. 19s. 0d. costs was imposed.

A bottle of pasteurised milk was found to contain a fly and other debris. The sellers were prosecuted and fined £10 with £6. 13s. 0d. costs.

ICE CREAM

All manufacturers and dealers in ice-cream were registered under the provisions of the Nottingham Corporation Act 1935 and their premises also were registered under the provisions of the Food and Drugs Act 1955.

A total of 753 inspections was made.

Registrations in force at the end of the year:—

MANUFACTURERS:			
“Hot mix” method	..	..	4
“Cold mix” method	..	..	9
		—	13
VENDORS AND DEALERS:			
“Pre-packed” ices	..	..	1,054
“Loose” ices	..	..	249
		—	1,303
New registrations		..	44
Transfers of registrations		..	20

Sampling: Ice Cream. A total of 59 samples was taken for analysis; all conformed to the standard required by the Food Standards (Ice Cream) Regulations 1959.

Lollies. Bacterial examination was made of 19 lollies and all were found to be satisfactory.

Grading. Samples for bacteriological grading by the Methylene Blue reduction test were taken as under :—

Grade	Time taken to reduce Methylene Blue	No. of Specimens
1	4 or more hours	113
2	2½–4 hours	13
3	1–2 hours	4
4	0–½ hour	—

The recommended standard is that, over a six-monthly period, 50 per cent of a vendor’s samples should fall into Grade I, 80 per cent into Grades I or II, not more than 20 per cent into Grade III and none into Grade IV.

FERTILISERS AND FEEDING STUFFS

Samples taken	Satisfactory	Unsatisfactory	Total
Fertilisers:			
Basic Slag	1	—	1
Bentley's Chrysanthemum No. 1 ..	—	1	1
Bones, steamed	1	—	1
Dried Blood	—	1	1
Hydrated Garden Lime	2	—	2
Nitrate of Soda	2	—	2
Nitro Chalk	1	—	1
Plant Food	1	—	1
Sulphate of Potash	1	—	1
"Tomatabs"	1	—	1
Feeding Stuffs:			
Balancer Meal	1	—	1
Chicken Food No. 2	—	1	1
Layers' Mash	5	—	5
Layers' Pellets	1	—	1
Laying Meal	1	—	1
Pig Fattening Meal	—	1	1
Pig Food No. 1 (Sow and Weaners)	1	—	1
Pig Food No. 2 (Fattening) ..	1	—	1
TOTALS	20	4	24

Action taken on unsatisfactory samples was as follows:—

- Bentley's Chrysanthemum No. 1. Warning letter from Town Clerk to sellers re errors in labelling.
- Dried Blood Warning letter from Town Clerk to sellers re marking of products.
- Chicken Food No. 2 .. Letter from Chief Public Health Inspector to manufacturers with labelling advice.
- Pig Fattening Meal .. Slight deficiency of fibre. Millers advised by inspector.

PHARMACY AND POISONS

The Act permits the sale of poisons in Part II of the Poisons List by persons whose names and premises are entered in the Local Authority's list.

Applications for entry received	..	..	..	14
Transfer of licences	..	..	..	Nil
Persons ceasing to operate under the Act	..	..	..	16

Two letters were sent to persons committing minor infringements of the Act.

SHELL FISH

Shellfish from various sources were received at the Sneinton Wholesale Fish Market. The total weight found to be unfit for human consumption was 4 tons 3 cwt.

Sixteen samples of mussels were taken, all of which were found to be satisfactory. They originated from layings in England, Wales, Ireland and Denmark.

DETAILS OF UNSOUND FOOD SURRENDERED

Food other than meat	In stones					
	1962	1961	1960	1959	1958	1957
Bacon	66	133	156½	140	105¾	95¾
Butter	5	10	3	5½	4¾	1¾
Canned goods ..	3,639	4,902	5,099½	4,974	5,094¼	4,124
Cakes and pastry ..	51	12	21	4	18	24½
Cheese	57	41½	57	68	196½	249
Chocolate and sweets	17	120¼	77½	8½	38	3½
Coffee	1	2½	7	6	—	1¼
Conserves	29	28	60	25	32¾	70¾
Cooked meat ..	24	1	—	—	2¼	—
Dried fruit ..	11	25½	57	34½	33¼	8¾
„ milk	3	—	11	8	—	—
Eggs—liquid ..	1	2	—	3	—	2
—shell	8	—	3	—	6	28
Fish	699	975½	873	572	358½	436¾
Fruit	961	300½	1,460	82	463¾	56
Flour	18	8½	7	114½	14	5¼
Margarine	13	3½	29½	2	—	29
Miscellaneous ..	922	4,291	175½	825	240	159½
Poultry	18	19½	43½	105	5	42½
Rabbits	12	20½	2	1½	13	—
Sausage	18	42½	99	41½	41¼	29
Shell fish ..	670	561½	1,200	1,098	376¾	1,077
Sugar	1	—	55½	1	—	¼
Synthetic cream ..	30	1	10	5	3	—
Vegetables ..	1,636	1,458	914½	2,973	935	315¼
TOTAL ..	8,910	12,959¾	10,422	11,097	7,981¾	6,759¾

Meat	Home-killed			Imported		
	in stones			in stones		
	1962	1961	1960	1962	1961	1960
Beef	3,440	3,277½	4,981	81	44½	25
Mutton and Lamb	630	595	442	29	66	5
Pork	1,873	1,359½	1,761	50	5½	7
Veal	91	110½	58½	—	—	—
Offals	13,603	13,017½	15,223	176	273	132
TOTAL ..	19,637	18,360	22,465½	336	389	169

GRAND TOTAL SURRENDERED 1960: 22,634½ stones = approx 141½ tons.
„ „ „ 1961: 18,749 „ = „ 117 „
„ „ „ 1962: 19,973 stones = approx. 125 tons.

SAMPLING OF FOOD AND DRUGS

Item	Genuine			Unsatisfactory			Totals		
	Formal	In-formal	Total	Formal	In-formal	Total	Formal	In-formal	Total
Milk, raw	358	—	358	53	—	53	411	—	411
Milk, processed	75	8	83	1	2	3	76	10	86
Milk, canned, condensed ..	—	15	15	—	1	1	—	16	16
Butter, cream, cheese and other dairy products	—	26	26	—	8	8	—	34	34
Ice-cream and frozen lollies ..	—	62	62	—	3	3	—	65	65
Open meat products	—	21	21	—	2	2	—	23	23
Canned or preserved meats and meat products	—	28	28	—	4	4	—	32	32
Canned or pre-packed fish and fish products	—	14	14	—	2	2	—	16	16
Soups	—	13	13	—	—	—	—	13	13
Oils and fats	10	6	16	—	—	—	10	6	16
Fresh fruits and vegetables ..	—	—	—	—	—	—	—	—	—
Canned or preserved fruits and vegetables	—	65	65	—	12	12	—	77	77
Sweets, sugar confectionery, etc. ..	—	11	11	—	1	1	—	12	12
Jams, conserves, fruit curds, jellies, etc.	—	24	24	—	1	1	—	25	25
Bread, biscuits, etc.	—	6	6	—	1	1	—	7	7
Flours and flour mixtures	—	18	18	—	—	—	—	18	18
Cakes and puddings	—	—	—	1	1	2	1	1	2
Canned or pre-packed puddings ..	—	18	18	—	—	—	—	18	18
Cereals	—	16	16	—	1	1	—	17	17
Food flavourings and colourings ..	—	3	3	—	—	—	—	3	3
Food drinks and non-alcoholic beverages	—	25	25	—	1	1	—	26	26
Spices, sauces and condiments ..	—	52	52	—	5	5	—	57	57
Wines, spirits and other alcoholic beverages	4	2	6	—	—	—	4	2	6
Drugs (internal and external use) ..	1	12	13	—	1	1	1	13	14
Baking powders and raising preparations	—	2	2	—	—	—	—	2	2
Miscellaneous	—	5	5	—	—	—	—	5	5
TOTALS	448	452	900	55	46	101	503	498	1,001

PART IV
MISCELLANEOUS

ADMINISTRATION

EPILEPSY AND CEREBRAL PALSY

ESTABLISHMENTS FOR MASSAGE OR SPECIAL
TREATMENT

INCIDENCE OF BLINDNESS

NATIONAL ASSISTANCE ACTS 1948
and 1951

NURSES AGENCIES ACT 1957

NURSING HOMES

NOTTINGHAM CREMATORIUM

MORTUARY

SICKNESS RETURNS—MINISTRY OF NATIONAL
INSURANCE

ULTRA VIOLET RAY CLINIC

ADMINISTRATION

Staff. The high rate of turnover of clerical staff continued. Again, as in 1961, there were 14 resignations, but only 13 appointments were made. The reasons for resignation were more diverse than last year, being as follows:—

Employment by Other Local Authorities	..	4
„ „ Industry	.. ..	2
Left the City	.. ..	2
Pregnancy	.. ..	2
Nursing training	.. ..	1
Marriage	.. ..	1
Theatrical work	.. ..	1
Retirement	.. ..	1

Although four male members of the clerical staff resigned only one male appointment was made. No more suitable applications were received from men, and the vacancies were filled by women.

During the year, approval was given to a scheme for the appointment of three juniors supernumerary to the staff, on the understanding that they would be absorbed into future vacancies and that no overspending of estimates would result. Three appointments were made at the end of the school year in July, and two have already been absorbed. The third, a shorthand/typist, is still supernumerary, but, owing to vacancies for clerks, no overspending will result.

The scheme proved worthwhile in that three well qualified juniors were selected out of a large number of applicants. The good response was no doubt due to the timing of the advertisement and co-operation with the Youth Employment Officer. The plan will again be operated during 1963, but probably three junior clerks will be sought instead of two clerks and one shorthand/typist, as the latter has proved difficult to absorb into the approved establishment this year.

One long serving member of the clerical staff, Mr. C. H. Cooper, retired after 40 years efficient and loyal service. His colleagues wish him well.

Ten Year Plan. One very big piece of work undertaken during the year was the preparation of the 10 year development plan. Since this appears in full on other pages of the report no further comment is necessary here, except to say that its preparation meant many extra hours worked by senior staff.

Organisation and Management. Many people feel that worthwhile reorganisation of procedures can best be undertaken by those outside, looking in. Whilst in general one might agree with this view, some improvement can be achieved within an organisation by a little reflection when the real pressure is off. One example of this during the year was a review of the Welfare Foods distribution service, which resulted in a reduction of 23 hours clerical time, and this, together with reduced hours of opening, will mean a saving of some £400 a year.

Perhaps the unfortunate thing is that pressure of work on the administrative staff allows little time for such reflection, or more might be achieved.

Accommodation. Although no tangible progress was made in connection with the proposed new Headquarters for the Health Services, the year did finish on an optimistic note. Several meetings were held during the year as a result of which the need for the new building appeared to be accepted by all concerned, the only questions outstanding being the selection of the actual site within the Civic Centre area and the timing of the project.

EPILEPSY AND CEREBRAL PALSY

The number of persons known to be suffering from Epilepsy and Cerebral Palsy is shown below. Although an individual may be known to more than one service of the Local Authority he is shown in the table under the service mainly concerned with his welfare.

	Local Education Authority	Mental Health Services	Welfare Services	Others	TOTAL
Cerebral Palsy . .	33	59	23	23	138
Epilepsy . .	104	110	31	17	262
Cerebral Palsy and Epilepsy . .	2	21	—	—	23

ESTABLISHMENTS FOR MASSAGE OR SPECIAL
TREATMENT

The licences of eighteen establishments were renewed during the year under the Nottingham Corporation Act, 1952, and one application for initial licensing of premises was approved. Three establishments licensed in 1961 closed down during the current year. Certificates of exemption were received in respect of seven registered members of either the Chartered Society of Physiotherapists or the Faculty of Physiotherapy.

INCIDENCE OF BLINDNESS

Blind	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(1) Cases registered during the year in respect of which para. 7(c) of Forms B.D.8 recommends:				
(a) No treatment ..	19	4	—	21
(b) Treatment (medical, surgical or optical)	28	9	—	20
(2) Cases at (1) (b) above which on follow up action have received treatment	16	9	—	20
Partially-Sighted				
(1) Cases registered during the year in respect of which para. 7 (c) of Forms B.D.8 recommends:				
(a) No treatment ..	1	—	—	7
(b) Treatment (medical, surgical or optical)	7	2	—	9
(2) Cases which received follow up treatment ..	6	2	—	7
Number of blind persons on register at 31st December				725
Number of partially sighted persons on register at 31st December				137

Ophthalmia Neonatorum

There were no cases of impairment of sight.

NATIONAL ASSISTANCE ACTS 1948—1951

Since the implementation of the Act, no person has ever been removed compulsorily.

A public health inspector made the necessary arrangements for disinfestation and cleansing of three elderly people, one of whom had been referred by his general practitioner; the other two came to notice because of a possibility of eviction on account of persistent uncleanness.

NURSING HOMES

One licence was surrendered and one home moved to new premises during 1962. At the end of the year four homes were in existence providing between them ten maternity beds and forty-six beds for medical and surgical cases.

The homes were regularly inspected by a medical officer and the maternity home was also visited by the Supervisor of Midwives.

NURSING AGENCIES

The licences of two long established nursing agencies were recommended for renewal in December. There were sixteen state registered nurses, one state certified midwife and three enrolled nurses on the registers at the end of the year.

NOTTINGHAM CREMATORIUM

The total number of cremations, 3,818, showed little change and the tables compare the figures for 1962 with those of previous years.

Year	ALL CREMATIONS		CREMATIONS OF CITY RESIDENTS		
	No.	Alteration from previous year	No.	Alteration from previous year	Percentage of all City deaths
1953 ..	3,126	+ 13%	1,139	+ 18%	33·2%
1954 ..	3,578	+ 14%	1,311	+ 13%	39·7%
1955 ..	3,940	+ 10%	1,432	+ 9%	40·6%
1956 ..	3,806	— 3%	1,528	+ 7%	43·8%
1957 ..	3,481	— 9%	1,477	— 3%	43·7%
1958 ..	3,967	+ 14%	1,619	+ 9%	47·3%
1959 ..	3,972	+ 0·1%	1,731	+ 7%	48·1%
1960 ..	3,658	— 7·9%	1,692	— 2·2%	49·2%
1961 ..	3,796	+ 3·8%	1,944	+ 14·9%	52·7%
1962 ..	3,818	+ 0·6%	1,915	— 1·5%	52·9%

Cremation and Residence

PLACE OF RESIDENCE	NO. OF CREMATIONS				
	1962	1961	1960	1959	1958
City	1,915	1,944	1,692	1,731	1,619
County excluding West Bridgford	1,300	1,279	1,388	1,694	1,686
West Bridgford	243	236	222	179	206
Other areas	360	337	356	368	456
TOTAL	3,818	3,796	3,658	3,972	3,967

MORTUARY

There were 602 bodies taken to the mortuary in Canal Street, and autopsies to determine the cause of death were performed there on 558 of them. The corresponding figures for 1961 were 530 and 500.

Most of the bodies were subject to the Coroner's jurisdiction, being those of persons whose death occurred within the City.

MINISTRY OF NATIONAL INSURANCE SICKNESS
RETURNS

The number of claims for sickness benefit gives an indication of sickness of the population month by month.

Average No. of sickness claims per week					
	1962	1961	1960	1959	1958
JANUARY ..	2,447	3,241	1,512	1,708	2,209
FEBRUARY ..	1,670	2,130	1,563	2,541	1,669
MARCH ..	1,575	1,176	1,392	1,528	1,395
APRIL ..	1,152	1,045	1,192	1,117	1,066
MAY ..	1,044	995	1,161	940	903
JUNE ..	909	1,024	909	926	964
JULY ..	848	892	826	869	880
AUGUST ..	782	807	867	847	749
SEPTEMBER ..	1,059	1,031	1,074	1,047	1,009
OCTOBER ..	1,367	1,418	1,326	1,275	1,233
NOVEMBER ..	1,297	1,277	1,292	1,331	1,339
DECEMBER ..	1,336	1,363	1,195	935	1,120

RESPIRATORY INFECTIONS

NOTIFICATIONS OF PNEUMONIA													
		Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
1962	..	25	12	11	10	5	5	4	7	—	2	1	18
1961	..	54	73	15	15	8	4	2	2	3	2	9	8
1960	..	13	17	25	18	12	10	3	4	9	13	8	20
1959	..	26	34	32	14	8	18	6	6	3	11	8	7
1958	..	39	49	20	25	12	5	4	10	8	5	15	16
1957	..	30	13	7	13	12	11	6	13	22	80	31	26
DEATHS													
		Influenza				Bronchitis				Pneumonia			
1962*	..	24				351				199			
1961	..	86				341				206			
1960	..	9				242				209			
1959	..	57				298				193			
1958	..	32				322				173			
1957	..	56				248				181			

* Provisional

ULTRA VIOLET RAY CLINIC

Early in the year the Health Committee decided that only old age pensioners, persons in receipt of grants from the National Assistance Board and children under the age of five years should receive free treatment. Consequently, with effect from 2nd April, a fee of 4/6d. per treatment was charged to all persons not coming within these categories. There was a subsequent decline in attendances, and arrangements were made for treatments to be given during mornings only from September.

SUMMARY OF THE WORK

	1962	1961	1960	1959	1958	1957	1956
Cases brought forward ..	433	518	542	551	299	281	237
New cases ..	152	225	277	328	353	355	380
Total treated	585	743	819	879	652	636	617
City patients ..	579	736	813	873	649	632	600
County patients	6	7	6	6	3	4	17
	585	743	819	879	652	636	617
Adult patients male ..	156	194	241	302	195	192	175
Adult patients female ..	324	404	417	468	325	313	312
Patients 5-15 yrs.	77	114	117	77	98	101	93
Patients 0-5 yrs.	28	31	44	32	34	30	37
	585	743	819	879	652	636	617
Cases discharged or ceased to attend ..	447	310	301	337	101	337	336
Cases carried forward ..	138	433	518	542	551	299	281
	585	743	819	879	652	636	617
No. of treatments:							
total given ..	6,016	9,804	11,445	12,897	13,270	12,395	11,313
average per patient ..	10.28	13.2	14.0	14.7	20.3	19.5	18.3

PART V

HEALTH COMMITTEE

”

”

STAFF

”

”

REPORTS TO THE
CITY COUNCIL

FINANCIAL SUMMARY

TEN YEAR PLAN

HEALTH COMMITTEE
1962

LORD MAYOR:
ALDERMAN S. P. HILL, J.P.

CHAIRMAN:
COUNCILLOR DR. ERNEST WANT, M.B., Ch.B.

VICE-CHAIRMAN:
COUNCILLOR F. W. WOOTTON

ALDERMAN A. W. NORWEBB, A.R.S.H., J.P.

COUNCILLOR T. J. ARNOLD

COUNCILLOR DR. G. K. EMSLEY, M.R.C.S., L.R.C.P.

COUNCILLOR G. W. FISHER

COUNCILLOR MRS. S. F. M. HUNTER

COUNCILLOR D. R. JACKSON

COUNCILLOR MRS. I. F. MATTHEWS

COUNCILLOR MRS. O. MOSS

COUNCILLOR F. J. NEALE

COUNCILLOR L. WHITEHOUSE

COUNCILLOR MRS. M. WHITTAKER

COUNCILLOR A. G. WRIGHT

HEALTH COMMITTEE STAFF

Medical Officer of Health—

WILLIAM DODD, M.D., M.R.C.P., D.P.H.

Deputy Medical Officer of Health—

KENNETH W. MATHESON, B.Sc., M.B., Ch.B., D.C.H., D.P.H.

Senior Medical Officers—

L. ANN WILSON, M.D., B.Sc., D.C.H., D.P.H.

IAN G. P. FRASER, M.B., Ch.B., D.P.H.

ANTHONY D. BOSTOCK, M.B., Ch.B., D.P.H.

Senior Assistant Medical Officers—

WILLIAM L. PALMER, M.B., B.S., D.T.M. & H., D.P.H.

DORIS STORY, M.B., B.S., D.P.H.

MYRTLE V. RICHARDS, M.B., Ch.B., D.C.H., D.P.H. From 10.9.62.

Medical Officers—

FREDA M. CHALKLEY, M.R.C.S., L.R.C.P.

JANET B. DALGETTY, M.B., Ch.B.

SYLVIA M. MATTHEWS, M.B., B.S.

ARTHUR J. PAUL, M.B., B.S., D.P.H. To 9.7.62.

E. MALCOLM CLARK, M.R.C.S., L.R.C.P., D.T.M. & H.

In conjunction with Sheffield Regional Hospital Board

A. C. BLANDY, M.A., M.B., B.Ch., M.R.C.P., M.R.C.S., D.P.H.
Consultant Paediatrician

J. KAMIENIECKI, Ph.D., M.A., LL.M.
Senior Psychologist

D. MACMILLAN, M.D., B.Sc., F.R.C.P.E., D.Psych.
Consultant Psychiatrist

H. J. MALKIN, M.D., F.R.C.S., F.R.C.O.G., L.R.C.P.
Consultant Obstetrician

J. V. WHITAKER, M.B., Ch.B., D.T.M. & H., D.P.H.
Chest Physician

City Analyst—

W. W. TAYLOR, B.Sc., F.R.I.C. †

John Ryle Health Centre—

Secretary —MISS D. WHITE. To 15.7.62.

† Part-time

Superintendent Nursing Officer—

MISS M. EDWARDS, S.R.N., S.C.M., S.R.F.N., H.V., P.H.N. Admin. Cert.

Midwifery Service—*Supervisor*—MISS P. J. LAMBERT, S.R.N., S.R.F.N., S.C.M., M.T.D.,
H.V., Q.N.*Assistant Supervisor*—MISS N. ANTILL, S.R.N., S.C.M., M.T.D.*Midwives*—40 Full-time.

10 Part-time.

Health Visiting Service—*Deputy Superintendent*—MISS M. L. DEVERELL, S.R.N., S.C.M., H.V.,
P.H.N. Admin. Cert.*Health Visitor Tutor*—MISS D. T. HOGG, S.R.N., S.C.M., H.V. Tutor Cert.*Senior Tuberculosis Visitor*—MISS E. CALEY, S.R.N., S.C.M.*Welfare Centre Superintendents* 8*Health Visitors*—General 24

,, Part-time 5

Tuberculosis 5

Students 3

Day Nurseries*Supervisor*—MISS K. THOMPSONBULWELL *Matron*—MRS. Y. CHAPMAN, C.N.N. To 31.1.62.
MISS S. J. E. FLETCHER, C.N.N.
From 26.3.62.*Nursery Nurses*—5*Warden* —1DOWSON *Matron*—MRS. P. BATES, C.N.N.*Nursery Nurses*—5*Warden* —1HEATHCOAT STREET .. *Matron*—MISS M. R. M. DALE, C.N.N.*Nursery Nurses*—5*Warden* —1PIERREPONT .. *Matron*—MISS E. I. WALKER, R.S.C.N.*Nursery Nurses*—5*Warden* —1QUEEN'S DRIVE .. *Matron*—MRS. E. MACKINTOSH, S.R.N., S.C.M.*Nursery Nurses*—5*Warden* —1RADFORD .. *Matron*—MRS. M. A. R. NAYLOR, S.R.N.*Nursery Nurses*—5*Warden* —1SYCAMORE ROAD .. *Matron*—MRS. H. ROSS, R.S.C.N., C.N.N.*Nursery Nurses*—5*Warden* —1

Mother and Baby Home—*Matron*—MRS. M. SHAW, S.C.M. To 31.8.62.*Deputy Matron*—MISS L. PLUMB, S.R.N., S.C.M. To 31.8.62.**Octagon Club—Nuffield House—***Supervisor*—MRS. I. M. BEDFORD.*Assistant Supervisor*—MRS. M. J. HEATHCOTE.*Occupational Assistants*—2**Social Workers—**

MISS M. BOTTOMS.

MISS M. H. WILLIAMS.

MRS. G. M. BROWN, B.A.

Home Nursing Service—*Superintendent*—MISS M. M. KNOTT, S.R.N., S.C.M., H.V., Q.N.*Senior Assistant Superintendent*—

MRS. B. E. DAVIS, S.R.N., H.V., Q.N.

Assistant Superintendents—

MISS W. V. SHELTON, S.R.N., S.C.M., H.V., Q.N. To 30.6.62.

MISS J. K. GIBSON, S.R.N., S.C.M., Q.N.

MRS. M. HOGAN, S.R.N., S.C.M., Q.N. From 1.12.62.

Home Nurses—65 Full-time.

— 6 Part-time.

Home Help Service—*Organiser*—MRS. L. E. GRAY.*Deputy Organiser*—MRS. M. E. JILLINGS.*District Organisers*—

MRS. E. M. CRICH.

MISS L. ELLIOTT.

MRS. R. SMITH.

MRS. N. D. YOUNG.

Case Workers— 8.*Home Helpers*—124 Full-time.

—349 Part-time.

Mental Health Service—*Mental Health Officer*—J. E. WESTMORELAND, M.B.E.*Deputy Mental Health Officer*—G. E. HIBBARD.*Senior Social Worker*—MISS M. PIMLOTT.*Social Workers*—4**Mental Welfare Officers*—6.,, ,, *Assistants*—2.*Occupation Centre Superintendent*—D. H. CATER, R.M.N.,, ,, *Staff*—14.

* In conjunction with the Sheffield Regional Hospital Board.

Administrative and Clerical—

Administrative Officer—C. V. TUBB, D.P.A.

„ *Asst.* —F. F. PELLATT, D.P.A., P.H.I.Cert.

Senior Clerks—17.

Clerks General Division, all sections—Full-time 49.

—Part-time 22.

Public Health Inspection Service—

Chief Public Health Inspector—A. WADE, M.B.E., F.R.S.H. To 6.4.62.

—R. YOUNG, M.R.S.H. From 9.4.62.

Deputy Chief Public Health Inspector—R. YOUNG, M.R.S.H. To 8.4.62.

—J. D. McDONALD, M.R.S.H.

From 1.6.62.

Senior Inspector of Meat and other Foods—E. B. HOCKEN, P.H.I.Cert.

„ *Housing Inspector*—J. D. McDONALD, M.R.S.H. To 31.5.62.

—H. TRINICK. From 3.10.62.

Public Health Inspectors, all branches—Full-time 18.

—Part-time 1.

„ „ „ *Trainees* — 6.

Smoke Inspector—1.

Technical Assistants—2.

Woman Housing Officers—4.

Ambulance Service—

General Manager—B. ENGLAND, M.I.Mech.E., M.Inst.T. To 14.12.62.

J. C. WAKE, A.C.I.S., M.Inst.T., M.I.R.T.E.

From 15.12.62.

Chief Ambulance Officer—C. G. DEWEN, A.I.A.O., F.I.C.A.P.

Ultra Violet Ray Clinic—

HENRY N. JAFFE, M.B., B.S. †

Senior Nurse/Attendant—MRS. G. M. WHITTINGTON, S.R.N. To 3.2.62.

MISS. I. HOPKINSON, S.E.N. From 5.2.62.

Nurse/Attendant—1.

Other Staff—

<i>Abattoir Assistant</i>	..	..	1	
<i>Caretakers</i>	..	..	4	
<i>Cleaners</i>	..	..	12	Full-time.
			12	Part-time.
<i>Cook/Housekeeper</i>	..	..	1	
<i>Cooks</i>	..	..	12	
<i>Drivers</i>	..	..	4	
<i>Maintenance Assistant</i>	..	..	1	
<i>Mortuary Attendants</i>	..	..	2	
<i>Nursing Aid</i>	..	..	1	Part-time
<i>Rodent Operators</i>	..	..	6	
<i>Seamstress</i>	..	..	1	Part-time.
<i>Storemen</i>	..	..	1	

† Part-time.

HEALTH REPORT 1962

REPORTS

OF THE

HEALTH COMMITTEE

TO THE

CITY COUNCIL

**AS TO THE CLOSURE OF THE MOTHER AND BABY HOME,
8 MAPPERLEY ROAD, NOTTINGHAM.**

THE HEALTH COMMITTEE

Beg to report

That the Mother and Baby Home at No. 8 Mapperley Road has been in use since March 1954. Originally, it was in addition to the Mother and Baby Home at No. 1 Queen's Drive, but this latter home was closed in November 1954 when the demand for this type of accommodation fell. No. 8 Mapperley Road provides accommodation for up to eight unmarried mothers and their babies. The mothers enter the home four to six weeks before confinement, for which they are admitted to hospital, returning to the home after about ten days for a further period. The average stay in the home is about seven weeks.

Generally, the home has been under-occupied, as the following table shows:—

			<i>Admissions.</i>	<i>Average occupancy.</i>	<i>Weekly Cost per Mother.</i> £ s. d.
1958	..	..	26	4·6	15 10 2
1959	..	..	30	3·4	21 4 7
1960	..	..	27	4·7	17 10 8
1961	..	..	48	6·5	11 15 4

Because the average occupancy has been low and also because the home, even when full, is only small, the cost of providing accommodation is high.

Accordingly, your Committee have considered whether their function could not be performed in some more economical way, and have come to the conclusion that the home should now be closed and the work carried out mainly through the agency of the Southwell Diocesan Board of Moral Welfare.

The Board has been established for many years with headquarters in the City, and employs a number of case workers. Organisations associated with the Board maintain residential homes at Mansfield and Newark, and where necessary, arrangements are made for mothers to be accommodated in residential homes elsewhere.

At present, the Board carries out a limited amount of case work in the City in respect of which your Committee make an annual contribution of £550. Under the proposed arrangement, which requires final confirmation both by the City Council and the Board, the amount of case work will be considerably increased and the contribution will be raised to £1,200.

Already, the Southwell Board makes arrangements for a number of mothers resident in the City to enter voluntary homes, and for these your Committee incurs no financial responsibility. Under the proposed arrangement it is likely that many of these mothers will claim financial assistance, and accordingly, on the basis of the 1961 figures, it is estimated that the Southwell Board will make arrangements for 71 mothers in a full year and the Roman Catholic organisations for a further 12.

The total estimated annual cost would therefore be:—

					£
Contribution towards case work	..	..			1,200
Cost of maintaining mothers in homes by Southwell					
Diocesan Board	..	..	..	..	1,846
Cost of maintaining mothers in Roman Catholic					
Homes	..	..	..	..	300
					<hr/>
					£3,346
					<hr/>

The above proposals, compared with costs during 1961/62 would effect a saving of £1,200 a year, and in addition, 83 mothers would be helped as compared with about 40 under the

present arrangements. This saving would not be realised during the first year, when the gradual transfer of functions from the Mother and Baby Home to the Southwell Diocesan Board of Moral Welfare and the Roman Catholic organisations might involve an increase in estimated expenditure of about £700.

In order to effect this change, it will be necessary, with the approval of the Minister of Health, to modify the City Council's proposals for the care of mothers and young children made under section 22 of the National Health Service Act, 1946. The existing proposals, which were made when the home at No. 1 Queen's Drive was in use, are as follows:—

7. Care of unmarried mothers and their children.

There will be a home for 10 unmarried mothers and their children. Every encouragement will be given to the girls concerned to come into residence for a considerable part of the ante-natal period. Also they will be encouraged to remain in the home as long as they can do so advantageously after the birth.

The premises are not ideal but good work has been done there for over 20 years.

PART III

Near Future Development Plan.

..... Thirdly, it is necessary to obtain new premises or build them to rehouse the unmarried girls' home and the nursery attached”.

Your Committee propose that the reference in the Near Future Development Plan should be deleted, and that the following should be substituted for the existing paragraph 7:—

“7. Care of unmarried mothers and their children.

Arrangements will be made with appropriate voluntary organisations for the care and accommodation of unmarried mothers and their children. Every encouragement will be given to the girls concerned to come into residence for a considerable part of the ante-natal period. Also they will be encouraged to remain in residence as long as they can do so advantageously after the birth”.

Your Committee now recommend the City Council to make these amendments to the proposals under Section 22 of the National Health Service Act, 1946 and to authorise the Town Clerk to submit them to the Minister of Health for his approval.

Dated this 3rd day of April, 1962.

E. WANT,
CHAIRMAN.

This report was submitted to the City Council at their meeting on the 4th June, 1962, and was adopted.

AS TO THE ESTABLISHMENT OF A SMOKE CONTROL
AREA IN THE CITY OF NOTTINGHAM WEST OF THE OUTER
RING ROAD AND SOUTH OF TROWELL ROAD—WOLLATON
ROAD.

THE HEALTH COMMITTEE

Beg to report

That a detailed survey of the fourth proposed Smoke Control Area has now been completed. This is an area of 2,480·2 acres on the West Side of the City bounded by Trowell Road, Wollaton Road, Middleton Boulevard, Clifton Boulevard (including the proposed extension), the River Trent and the City Boundary.

It adjoins the Nottingham (No. 2) Smoke Control Area covering the City South of the Trent which is operative from the 1st November, 1962.

It also adjoins the Beeston (No. 3) Smoke Control Area of 527 acres containing 825 dwelling houses which came into effect on the 1st October, 1962.

The proposed area comprises the following buildings:—

Industrial	..	..	16
Commercial	..	..	80
Dwellings	..	..	4,641
Others	..	..	49
			4,786

In the case of dwellinghouses whose construction was commenced before the 5th July, 1956 (the date of the passing of the Clean Air Act, 1956), the Corporation will be liable to meet

part of the expenditure (in most cases 70%) necessary to adapt the existing house or its fireplaces to avoid contravention of the Smoke Control Order. The Corporation will, however, receive Government grant towards the expenditure so that ultimately 30% of the cost of necessary works will be borne by the owner, 30% by the Corporation and 40% by the Exchequer.

The estimated cost of the adaptations to the 4,277 dwelling-houses which will qualify for grant is £117,783. 0s. 0d. After allowing for Exchequer contribution the net cost to the Corporation (including an owner's share in respect of 1,983 Corporation owned houses) will be £51,719. 8s. 0d. In addition the Corporation may, at discretion, meet the whole or part of the owner's or occupier's share of this cost and your Committee will deal with applications for assistance on their merits.

In proper cases the Corporation have power to meet the whole or part of the cost of the adaptations required in Churches, Chapels and certain other buildings used by Charities. Your Committee propose to exercise this power in cases where hardship would otherwise arise.

The adaptation of fireplaces in buildings other than dwelling-houses is the responsibility of the owners or occupiers. The Corporation own a number of such properties in respect of which some expenditure may be incurred.

Certain classes of fireplaces installed since 1956, which are capable of being operated continuously without the emission of smoke are exempted from the provisions of the Clean Air Act, 1956, so far as they relate to smoke control areas. In general these are fireplaces which are fired by mechanical stokers. Fireplaces of this type installed before 1957 may be exempted.

Your Committee have made exemptions in previous Orders which have proved satisfactory and accordingly recommend the exemption of further coal burning furnaces in 12 premises within the area.

A Smoke Control Order cannot come into operation until six months after its confirmation by the Minister of Housing and Local Government. Your Committee propose that the Order relating to this area should come into force on the 1st November 1963.

Accordingly, it is now recommended that a Smoke Control Order be made in the form set out in the appendix to this report, and that the Common Seal be affixed to the necessary documents and that the Town Clerk be authorised to take all necessary steps in the matter.

Dated this 25th day of October, 1962.

E. WANT,
CHAIRMAN.

THE CLEAN AIR ACT, 1956.

NOTTINGHAM (No. 4) SMOKE CONTROL ORDER, 1962.

THE LORD MAYOR ALDERMEN AND CITIZENS OF THE CITY OF NOTTINGHAM (hereinafter called "the Corporation") in exercise of the powers conferred on them by Section 11 of the Clean Air Act, 1956 HEREBY MAKE the following order:—

1. This order may be cited as the Nottingham (No. 4) Smoke Control Order, 1962.

2. The Area which is coloured green on the map prepared in duplicate, sealed with the Common Seal of the Corporation and marked "Map referred to in the Nottingham (No. 4) Smoke Control Order, 1962" is hereby declared to be a smoke control area. One copy of the said map is deposited at the Town Clerk's Office, Guildhall, Nottingham, and the other is deposited in the offices of the Ministry of Housing and Local Government.

3. The fireplaces in the area which are specified in the Schedule hereto shall be exempted from the operation of the said Section 11 upon the conditions specified in respect thereof in the said Schedule.

4. This Order shall come into operation on the first day of November, 1963.

SCHEDULE

FIREPLACES

<i>Description</i>	<i>Conditions</i>
Nottingham University	The fireplace shall be so installed, maintained and operated as to minimise the emission of smoke. No fuel shall be used other than that for which the mechanical stoker was designed.
(a) School of Music (The two Sectional Water Heating boiler furnaces)	
(b) Wortley Hall. (The two Sectional Water Heating boiler furnaces)	
(c) Lenton Hurst (The two Sectional Water Heating boiler furnaces)	
(d) Florence Boot Hall (The two Sectional Water Heating boiler furnaces)	
(e) Florence Nightingale Hall (The three Sectional Water Heating boiler furnaces)	
(f) Clifton Boulevard Buildings (The two Sectional Water Heating boiler furnaces)	
Nottingham Corporation Wollaton Hall (The Sectional Water Heating boiler furnace)	
Mrs. A. Booth 608 Derby Road (The Sectional Water Heating boiler furnace)	
James Linday & Son Ltd. Montpelier Road, Dunkirk (The two Lancashire Steam boiler furnaces)	Replace the obsolete mechanical stokers. The fireplace shall be so installed, maintained and operated as to minimise the emission of smoke. No fuel shall be used other than that for which the mechanical stoker was designed.

FIREPLACES

<i>Description</i>	<i>Conditions</i>
Boots Pure Drug Co. Ltd., Lenton Experimental Department, Beeston Lane	The fireplace shall be so installed, maintained and operated as to minimise the emission of smoke.
(a) Insect House (The Sectional Water Heating boiler furnace)	No fuel shall be used other than that for which the mechanical stoker was designed.
(b) Laboratory Block (The Sectional Water Heating boiler furnace)	
(c) Lenton House (The Sectional Water Heating boiler furnace)	

This report was submitted to the City Council at their meeting on 5th November, 1962, and was adopted.

SERVICE	ACTUAL COST Year ended 31st March, 1962						ESTIMATED COST Year ended 31st March, 1963		
	Gross expenditure	Income other than Government Grants	Government Grants	Net expenditure to be met from Rates	Equivalent Rate poundage	Cost per head of population	Estimated net expenditure to be met from Rates	Equivalent Rate poundage	Cost per head of population
	£	£	£	£	s. d.	s. d.	£	s. d.	s. d.
Administration (not charged to other services) ..	7,488	4,036	—	3,452	.18	2 64	1,003	.05	.77
Public Health Inspection and other services ..	49,988	2,021	30	47,937	2 47	3 0 72	52,571	2 67	3 4 27
Health Centres ..	2,987	737	—	2,250	.12	1 72	1,735	.08	1 33
Maternal and Child Health ..	107,410	18,562	—	88,848	4 57	5 8 07	91,143	4 64	5 9 82
Midwifery ..	73,386	3,457	—	69,929	3 60	4 5 57	71,570	3 64	4 6 83
Health Visiting ..	46,925	2,117	315	44,493	2 29	2 10 09	49,082	2 49	3 1 60
Home Nursing ..	74,133	1,640	—	72,493	3 73	4 7 54	75,317	3 83	4 9 70
Vaccination and Immunisation	21,889	391	—	21,498	1 11	1 4 47	24,424	1 24	1 6 71
Ambulance ..	106,174	627	—	105,547	5 43	6 8 86	108,681	5 52	6 11 26
Prevention of Illness, Care and After-Care ..	43,377	2,091	—	41,286	2 12	2 7 63	32,557	1 65	2 0 94
Mental Health ..	42,852	1,137	—	41,715	2 15	2 7 96	43,832	2 23	2 9 58
Home Help ..	143,058	9,427	—	133,631	6 87	8 6 37	132,826	6 75	8 5 76
Other expenses ..	283	—	—	283	.01	.22	705	.04	.54
TOTAL ..	719,950	46,243	345	673,362	2 10 65	42 11 86	685,446	2 10 83	43 9 11

DEVELOPMENT PLAN FOR TEN YEARS 1963 to 1972

INTRODUCTION

The Minister of Health, in Circular 2/62, dated 23rd January, 1962, asked all local authorities to draw up development plans for their Health and Welfare Services covering the next decade. The plan is to cover (a) the services provided at the end of the financial year, 1961/62; (b) separate programmes for each of the following five years until 1966/67; and (c) a more general programme for the five year period from 1967/68 until 1971/72.

The plan is to be revised each year and each time taken a further year forward, so that it always covers developments proposed for the next decade. The Minister asked to be supplied with summaries of the plan by not later than 31st October, 1962. The annual revisions are to be sent by the same date each year.

HEALTH CENTRES

PRESENT POSITION

One Health Centre has been provided by the City Council under Section 21 of the National Health Service Act, 1946—The John Ryle Health Centre—sited on the periphery of the Clifton Estate. It comprises a block of four houses, rented from the Estates Committee and adapted so as to be intercommunicating and was opened in October, 1952.

The staff includes a secretary and caretaker and the net cost in 1961/62 was £2,250.

DEVELOPMENT PROPOSALS

(a) PREMISES

(i) **Clifton.** For a variety of reasons the John Ryle Health Centre has not proved very successful. Although well sited in the first instance, it is now on the edge of the Estate. The estate as a whole is now well supplied with general medical practitioners who have been granted sites for houses and surgeries in various parts as it has developed. It is proposed, therefore, to retain the present Health Centre only until 1963/64, and to erect a new Welfare Centre nearer to the centre of the Estate. Subject to agreement being reached with the Local Executive Council, the John Ryle Health Centre will then be closed and the premises will revert to housing purposes.

(ii) **Bestwood Park Estate.** When completed, during 1964, this Estate will contain some 3,000 dwellings and have a population of about 9,000. At the present time about half the dwellings have been erected. In addition there is a certain amount of private housing development in the vicinity.

No sites have, as yet, been allocated to general medical practitioners for houses or surgeries and the Estate is, therefore, suitable for the erection of a Health Centre.

It is, therefore, proposed that, during the financial year 1963/64, a Health Centre should be erected on a site already earmarked. The Centre will provide the usual local health authority services, together with suites for four medical practitioners, and residential accommodation for a secretary and a caretaker. There will be sufficient land for expansion to the full services envisaged in a Health Centre at a later date, if required.

(b) STAFF

(i) **Clifton.** During the financial year 1962/63, the staff at the John Ryle Health Centre is being reduced. A secretary will no longer be employed, and relief caretaking, cleaning, and clerical staffs are being discharged, leaving only a resident caretaker.

(ii) **Bestwood Park Estate.** When the Health Centre is erected the staff will have to be the same in number as that now employed at the John Ryle Health Centre.

(c) **FINANCE**

The capital cost of providing the Health Centre including furniture on Bestwood Park Estate is estimated to be £62,000. The approximate value of the land to be appropriated is £7,500. Estimates of net revenue expenditure are shown in Appendix 1.

CARE OF MOTHERS AND YOUNG CHILDREN

PRESENT POSITION

(i) **Welfare Centres.** There are 12 premises used as welfare centres in the City, five of which are owned by the Health Committee. These are:—

Edwards Lane Welfare Centre
Ernest Purser Welfare Centre, Wilford Road
75 Radford Boulevard.
Rosebery House, Southwark Street, Basford
Sneinton Welfare Centre, Kingston Street

Radford Boulevard and Rosebery House are both converted houses, but the other three are purpose-built premises.

The other seven premises are rented as follows:—

John Ryle Health Centre, Clifton 45 Bracebridge Drive, Bilborough		} Exclusive rental
Assembly Hall, Aspley Lane—5 sessions per week		} Sessional rental
Baptist Church Hall, Sherwood Rise—6	ditto	
British Legion Hall, Bramcote Lane, Wollaton—1	ditto	
General Dispensary, Gregory Boulevard—2	ditto	
School Health Service Clinic, Bulwell—4	ditto	

The exclusively rented premises are owned by the Estates Committee and the School Health Service Clinic at Bulwell by the Education Committee.

(ii) **Day Nurseries.** There are seven day nurseries in use in the City, one of which, the Dowson Day Nursery, Pearson Street, Basford, is owned by the Health Committee. The day nursery at 95 Queen's Drive is on lease from the Trustees of the Bluecoat School, the lease expiring in June, 1966. The one in Heathcoat Street is privately owned, being rented by the Health Committee, while the other four below are owned by the Ministry of Works:—

Bulwell Day Nursery, Main Street
Pierrepont Day Nursery, Gordon Road
Radford Day Nursery, Ashburnham Avenue
Sycamore Road Day Nursery, Woodborough Road

These last four were erected during the last War following which there were negotiations for their purchase by the Corporation. These were never concluded, so the premises still belong to the Ministry of Works, though the sites are, it is believed, owned by the City Council. No rent is paid by the Committee either for premises or sites.

(iii) **Welfare Foods Distribution Centres.** Welfare Foods are distributed during certain of the clinic sessions, at all the welfare centres, as well as from the following four premises:—

101a and 101b Derby Road—Central distribution point	} Exclusive rental
Bestwood Community Centre, Gainsford Crescent—2 sessions per week	
Clifton Youth Club, Southchurch Drive—1 ditto	} Sessional rental
Sycamore Community Centre, Lilac Street —1 ditto	

The exclusively rented premises are privately owned, whilst the sessional rents for the other three premises are paid to the Education Committee.

(iv) **Mother and Baby Home.** The City Council has provided a Home for the care of the unmarried mother and her child. It is situated at No. 8 Mapperley Road, owned by the Estates Committee, and rented by the Health Committee. There is accommodation for eight mothers and six babies.

(v) **Dental Treatment.** Dental care of expectant and nursing mothers and young children is undertaken at two places in the City. The dental clinic at the General Dispensary, Broad Street, is equipped by the Health Committee and rented from the authorities of the Dispensary for 2 sessions per week, while the Central School Clinic of the Education Committee is used for an average of about 1 session every 2 weeks. Sessional fees are paid to the Education Committee.

★ ★ ★

The total number of staff employed on duties under this Part of the Plan during 1961/62, was 122, comprising doctors, nurses, clerks, caretakers and domestics, and expenditure amounted to £88,848.

★ ★ ★

DEVELOPMENT PROPOSALS

(a) PREMISES

(i) **Welfare Centres.** Although the Cranbrook Committee has recommended that, ultimately, the general practitioner obstetrician should replace the local authority medical officer in the provision of ante-natal care, it is also envisaged that use will be made by them of the ante-natal clinics. Similarly, the work of routine examination, of vaccination and immunisation, of distribution of welfare foods and many other activities will continue to be carried out at Welfare Centres. There is not, therefore, any likelihood of a greatly diminished need for Welfare Centre premises for many years to come. In these circumstances, the Development Plan for Welfare Centres is based upon the present pattern.

Consideration has been given to the existing Centres and an appreciation made of the availability of public transport, the contours of the area, proximity to a shopping centre and the nature of the housing in the area to be served. In general, it is considered that there should be facilities available roughly in the ratio of 1 Centre to each 20,000 population.

These criteria have also been applied to 16 sites which were reserved for Health Committee purposes in the Development Plan of the City, and which were intended principally for the erection of Health Centres, rather than Welfare Centres. It is, however, considered that where a need for Maternal and Child Health Services exists, a Health or a Welfare Centre will fulfil much the same role. The establishment of a Health Centre, however, will depend not only upon the circumstances of the area but also upon the attitude of the general medical practitioners concerned.

The question of which type of Centre shall be erected is, therefore, a matter to be considered when the development of a site is imminent. In the meantime, except for the site on the Bestwood Park Estate, where a recommendation is made that a Health Centre shall be erected, the recommendations which follow refer only to Welfare Centres.

Edwards Lane Welfare Centre. This Centre is situated on Edwards Lane at the rear of the City Hospital. It was opened in December 1938 and is in good condition, being one of only three purpose built Welfare Centres in the City. It will remain in good condition for the whole of the period of this Plan and should be retained.

Ernest Purser Welfare Centre. This newly erected Centre provides clinic premises for the Health and Education Committees as well as 4 flats, two of which are unfurnished and two furnished. The former are occupied by midwives and the latter by Home Nurses. There are also 4 garages. The building was opened in July, 1956, and should be retained for the whole of the period covered by this Plan.

75 Radford Boulevard. This property was a dwelling house given to the City Council for Health Committee purposes which after adaptation, was opened as a Welfare Centre in May, 1936. With a shift in population and other changes since then, the Health Committee have already approved its replacement by a new Centre on Grant Street, where a site has been reserved.

Rosebery House, Southwark Street. This property was a dwelling house, purchased by the Corporation in 1946 and used as an occupation centre for mentally defectives. On the opening of the City Occupation Centre, certain adaptations were carried out, and Rosebery House became a Welfare Centre in January 1955. The premises are well sited and though old, they may last until the expiry of this Development Plan. Any redevelopment should take place on the same site.

Sneinton Welfare Centre. This is an *ad hoc* building at the junction of Kingston Street and Beaumont Street, which was opened in July 1955. It is in good condition and on a good site, and should be retained for the whole of the period covered by this Plan.

John Ryle Health Centre, Clifton. The accommodation provided for Welfare centre purposes in this Health Centre is now quite inadequate. The building was opened in October 1952, before the Clifton Estate was fully developed. It is now situated almost on the edge of the estate. A suitable site has been reserved in the centre of Clifton and it is essential that a new Welfare Centre, providing adequate facilities for an estate of more than 20,000 people, should be erected on that site at a very early date. In the meantime, it may be necessary to seek temporary accommodation near to the new site. When the new Welfare Centre is erected, the rented premises at present used will be given up.

45 Bracebridge Drive, Bilborough. This building, which is an ordinary council house, was first rented from the Estates Committee in January, 1949, in order to provide temporary Welfare Centre facilities on the post-war estates on the Western side of the City. The premises are inadequate and are now badly sited, and it is recommended that they should be replaced by an *ad hoc* building to be erected on a suitable site elsewhere in that area of the City.

Assembly Hall, Aspley Lane. These premises have been rented on a sessional basis from the trustees of the Hall ever since October, 1933. The number of sessions has been increased from time to time until now it has reached 5 per week, with provision in the 1962/63 estimates for a further 1 session each week. Rented premises of this kind are never satisfactory, and it is recommended that they be replaced by an *ad hoc* building to be erected on a suitable site elsewhere in that area of the City.

Baptist Church Hall, Sherwood Rise. The use of this Hall commenced in June 1960, when the clinic at Huntingdon House was closed. It is now rented for 6 sessions per week. Attendances are good and it is recommended that provision be made for the erection of an *ad hoc* Welfare Centre on a suitable site elsewhere in that part of the City.

British Legion Hall, Wollaton. This Hall was first used in November 1958. The clinics are well attended—there is now 1 per week—and the Model Farm Estate nearby is growing fast. It is, therefore, recommended that the use of these premises should be discontinued and that a Welfare Centre should be erected on a suitable site in that area of the City.

General Dispensary, Gregory Boulevard. The date when this branch of the General Dispensary was first used cannot be traced. It was some time during the 1939/45 War. It is now rented for 2 sessions per week the clinics being well attended, though the premises are not well sited. An extra session is about to be arranged. It is recommended that the use of the Dispensary should be discontinued after the erection of a Welfare Centre on a site to be obtained in the Hyson Green Redevelopment Area.

School Health Service Clinic, Bulwell. Part of these premises has been used for Health Committee purposes ever since the Clinic was opened by the Education Committee in April, 1935. There are now 4 sessions held each week. The site is good and the present use should continue, with the possibility that an extra session might be required.

To sum up the foregoing, the following premises should be retained throughout the whole period of this 10 year Development Plan.

Edwards Lane Welfare Centre
Ernest Purser Welfare Centre
Rosebery House Welfare Centre.
Sneinton Welfare Centre
Bulwell School Health Service Clinic

Reference has previously been made to 16 sites reserved for Health Committee purposes in the Redevelopment Plan of the City. Each of these sites is now considered and recommendations made concerning their use.

Spondon Street/Mansfield Road. An area of about 0.5 acre has been reserved here. It is a good site which would serve a large area at present without clinic facilities. A Welfare Centre should be erected upon it of a type without office facilities and which, it is suggested, could be of a pre-fabricated nature which would be relatively inexpensive to erect. This type of Welfare Centre is referred to hereafter as a sub-centre.

Nuthall Road/Broxtowe Lane. This has an area of 0.6 acre. A sub-centre is recommended which will partly replace Aspley Assembly Hall.

Moor Road/Strelley Road. There is 1 acre of land on which a sub-centre should be erected, partly replacing Aspley Assembly Hall and 45 Bracebridge Drive.

Beechdale Road/Western Boulevard. On 0.65 acre of land here there should be erected a Welfare Centre with the full facilities. This would replace 45 Bracebridge Drive, and serve a wide area along the Boulevard and into Wollaton.

Wollaton Vale, Wollaton. There is an area of 0.75 acre on which a sub-centre should be erected. This would replace the British Legion Hall.

Grant Street/Denman Street Area. A Welfare Centre with full facilities should be erected on 0.63 acre. This would replace the existing Welfare Centre at 75 Radford Boulevard.

Willoughby Street Redevelopment Area. A sub-centre should be erected on 0.75 acre to be reserved in this area. This would serve the Lenton and Dunkirk areas of the City.

Hyson Green Redevelopment Area. A sub-centre should be erected in this area on 0.75 acre to be reserved. This would replace the General Dispensary, Gregory Boulevard.

St. Ann's Well Road Redevelopment Area. A sub-centre should be erected on 0.75 acre to be reserved. This area, which is densely populated, is without clinic facilities within easy reach. This, and the Hyson Green sub-centre, would replace the facilities now provided at the Baptist Church Hall, and subsequently to be transferred to the former Mother and Baby Home, Mapperley Road.

Health Service Headquarters/City Centre. Full Welfare Centre facilities should be available for a large area without clinic facilities.

Southchurch Drive, Clifton. A site of some 1.25 acres has been reserved, on which a Welfare Centre with full facilities should be erected. This would replace the facilities at the John Ryle Health Centre.

Of the 16 reserved sites, it is proposed that 11 should be used as indicated above. In the case of 4 other sites, namely:—

	acre
Mansfield Road/Gregory Boulevard	0.58
Bracebridge Drive	1.50
Hucknall Road near City Hospital	1.50
Lambourne Drive, Wollaton	1.00

it is recommended that the Health Committee indicate no further interest, and that in the case of Lambourne Drive, which is owned by the Health Committee, the land be disposed of.

There remains 1 further site, at Squires Avenue, Bulwell, covering 0.85 acre. Though this is away from the main centre of Bulwell, it is recommended that the site be retained for the time being as the Health Committee's demand on the School Health Service Clinic is increasing and the Education Committee may not always be able to meet it.

If these proposals are accepted the Committee will have, including the Bestwood Park Health Centre, 17 Welfare or Sub-Centres covering the City or 1 for every 18,500 of the population, as follows:—

<i>Welfare Centres</i>	<i>Sub-Centres</i>	<i>Hired Premises</i>	<i>Health Centre</i>
Edwards Lane	Spondon Street	Bulwell School	Bestwood Park
Ernest Purser	Nuthall Road	Clinic	
Rosebery House	Moor Road		
Sneinton	Wollaton Vale		
Beechdale Road	Willoughby Street		
Grant Street	Hyson Green		
City Centre	St. Ann's Well		
Clifton	Road		

Finally, there is the question of priority. It is recommended that this should be as follows:—

- 1963/64 Bestwood Park Health Centre and Clifton Welfare Centre.
- 1964/65 Radford Welfare Centre.
City Centre. (*in conjunction with Health Services H.Q.*)
- 1965/66 Willoughby Street Sub-Centre
Wollaton Vale Sub-Centre
- 1966/67 Spondon Street Sub-Centre
Hyson Green Sub-Centre
- 1967/72 Beechdale Road Welfare Centre
Moor Road Sub-Centre
St. Ann's Well Road Sub-Centre
Nuthall Road Sub-Centre

(ii) **Day Nurseries.** The provision of day nurseries largely originated during the last War. In 1944, there were 1,449 nurseries throughout the country, but by 1959, this number had fallen to 477. In Nottingham 9 day nurseries were in use, but 1 was closed in 1958 and another in 1959, leaving 7 still in existence. Among the reasons for the continued relatively high demand for this service in the City are the high level of employment for women and the number of immigrants who have settled here.

A review of the likely demand indicates that the level will not decrease appreciably during the next ten years. It is, therefore, considered that, as the present day nursery provision is adequate, it should be retained at that level for the duration of this Plan. The individual premises are:—

Bulwell Day Nursery	} All these were purpose-built during the War. The demand at each is high; all are well sited and should be retained for the next 10 years.
Sycamore Road Day Nursery	
Pierrepoint Day Nursery	
Radford Day Nursery	

Dowson Day Nursery. The origin of the day nursery in Pearson Street, Basford, is obscure. It was certainly open during the 1914/18 War, and was run as an independent nursery. From 1929 onwards, the Health Committee made a grant towards running costs, and in 1950 it was taken over by the Committee, the land and premises being finally purchased in 1952. The Charity Commissioners were concerned in the matter and there is a condition that the property shall continue to be used as a nursery or for some other purpose connected with the care of mothers and children. The premises were renovated in 1952, but are not ideal. They should, however, last for the next ten years and it is, therefore, recommended that the nursery be retained.

Heathcoat Street Day Nursery. This nursery was established privately during the late years of the 19th century. From 1929 onwards a grant was made towards the running costs, and it was finally taken over towards the end of the last War. The premises are now held on lease from the trustees of the People's Hall, for a period of three years from the 24th June, 1962. The conditions are far from ideal. There is no play space and the internal arrangement is bad, but, being close to a congested area, the demand is high. It is, therefore, recommended that the premises should be given up, and that a new nursery of 40 places should be built on a site not too far away. In view of the need for economy, it is suggested that a pre-fabricated type of structure could be erected at a less cost than by traditional methods.

Queen's Drive Day Nursery. This nursery is established in a converted dwelling house. The premises, which are held on lease from the Trustees of the Bluecoat School, expiring in June 1966, originally formed part of the Health Committee's provision for unmarried mothers but in 1927, the Committee set up a creche for 15 children and this gradually developed until in 1938 the only premises being used for unmarried mothers was 1 Queen's Drive, whilst No. 95 had been completely taken over for day nursery purposes. Again the premises are old and far from ideal. Playing space is limited, but, since the area is congested, the demand for nursery provision is high. It is, therefore, suggested that the premises should be relinquished and a new pre-fabricated nursery of 40 places erected on a site not too far away.

Finally, there is the question of priorities. It is considered that this should be:—

1964/65 Heathcoat Street Day Nursery

1966/67 Queen's Drive Day Nursery

(iii) **Welfare Foods.** The central distribution point and the main store for Welfare Foods is in Derby Road, at Canning Circus. The premises are held from year to year on lease from the Nottingham Co-operative Society, Limited. The premises are not satisfactory from the point of view of internal arrangement, nor are they suitably sited.

It is proposed that both central distribution and stores should be included in the new Health Services Headquarters which should be completed in 1965/66. The premises in Derby Road would then be relinquished.

The general trend is for the amount of welfare foods distributed to decrease, and proposals are about to be considered for a contraction of the service. With the extended provision of welfare centres, this should enable the sessionally rented premises to be given up entirely. The session at the Clifton Youth Club which was organised by the Women's Voluntary Service ceased early in 1962 as the W.V.S. were unable to find a person willing to act as a sales clerk.

(iv) **Mother and Baby Home.** The premises at 8 Mapperley Road are owned by the Estates Committee and rented by the Health Committee of the City Council. They were first used for this purpose in January 1954, after extensive repairs and alterations had taken place. Since the Council's duties towards unmarried mothers and their children are shortly to be delegated to the Southwell Diocesan Board of Moral Welfare and other appropriate voluntary bodies, the premises will not be required for their original purpose after January 1963. The property can then revert to the Estates Committee.

(v) **Dental Treatment.** The premises used for dental treatment at the General Dispensary, Broad Street, are urgently needed by the Dispensary authorities for their own services. A room at the Ernest Purser Welfare Centre has now become vacant and it is proposed to explore the possibilities of its adaptation so that the Committee's dental equipment may be moved from the General Dispensary and future dental treatment for mothers given at the Welfare Centre. If the Principal School Dental Officer feels it necessary, some sessions for young children will still be held at the Central School Clinic of the Education Committee.

(b) **STAFF**

(i) **Welfare Centres.** In assessing the extra staff required to run these premises over the next 10 years, the following points have been taken into account:—

The Bestwood Park Health Centre has already been dealt with; the number of welfare and sub-centres, excluding Bestwood, will increase from 12 to 16; the question of health visitors will be dealt with later in the Plan; the use of centre premises by general practitioners and the possibility of general practitioners having clinics on their own premises, leading to a decline in the number of local authority medical officers; the opportunities for voluntary work in the care of small groups of children whilst their mothers attend "mothers' clubs" etc.; the existing staff at welfare centres being replaced by new buildings.

Bearing these and other points in mind, the following general principles have been adopted:—

Although the greater availability of facilities should lead to larger attendances, increased participation by general practitioners should mean that local authority medical staff will not need to be increased: later in the Plan it has been assumed that more health visitors will become available, so "other nursing staffs" have not been increased: each extra Welfare Centre will need 1 clerk and 1 caretaker; each extra sub-centre will need the equivalent of $\frac{1}{2}$ domestic; the new Radford Welfare Centre will need 1 caretaker but will reduce the domestic staff by $\frac{1}{2}$, the new Clifton Welfare Centre will require 1 caretaker only.

For the purpose of assessing additional staff, the following are reckoned as the extra premises:—

Welfare Centres	..	City Centre and Beechdale Road
Sub-Centres	..	Spondon Street and Willoughby Street

(ii) **Day Nurseries.** Since it is proposed to retain the day nursery provision in the City at its present level during the whole of the ten year Plan, the staff will remain constant.

(iii) **Welfare Foods.** The staff required will remain more or less constant, taking into account the proposals for a reduction in some sessions now, and a possible increase in sales with the wider coverage that will be possible when the new clinic premises are erected, and when the central distribution point is sited in the Health Services Headquarters.

(iv) **Mother and Baby Home.** No staff will be required, since the Home is to be closed early in 1963.

(v) **Dental Treatment.** If the Education Committee are able to obtain the services of the necessary dentists so that the number of sessions can be increased, it will be necessary at the same time to increase the clerical staff. It is anticipated, therefore, that the present part-time clerk will be increased to a full-time clerk during the five year period 1967/72.

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The total staff employed on duties under this Part of the Plan will increase by 7 during the ten year period, and will, therefore, total 129 by 1971/72.

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(c) FINANCE

(i) Welfare Centres. The costs which have been estimated by the City Engineer, and the site values which have been provided by the Estates Surveyor, for each of the proposed new Welfare and Sub-Centres are given below, as well as the estimates of the cost of furnishings. It is emphasised that at this stage, the costs can only be provisional.

<i>Building</i>	<i>Estimated cost of building work</i>	<i>Site Value</i>	<i>Cost of Furniture</i>
	<i>£</i>	<i>£</i>	<i>£</i>
Clifton Welfare Centre ..	25,000	7,500	500
Radford Welfare Centre ..	25,000	15,500	1,000
Civic Centre Welfare Centre ..	Cost Included in Total Cost of Health Services H.Q.		
Willoughby Street Sub-Centre ..	6,000	12,500	500
Wollaton Vale Sub-Centre ..	6,000	5,500	500
Hyson Green Sub-Centre ..	6,000	18,000	500
Spondon Street Sub-Centre ..	6,000	7,500	500
Beechdale Road Welfare Centre	25,000	4,000	1,000
Moor Road Sub-Centre ..	6,000	6,250	500
Nuthall Road Sub-Centre ..	6,000	4,500	500
St. Ann's Well Road Sub-Centre	6,000	11,000	500

It is estimated that each new Welfare Centre will cost £3,761 per annum in running expenses, and each new Sub-Centre £1,180. Some of the new buildings will replace existing premises, and the following table gives the net additional running costs involved. The Welfare Centre in the Civic Centre does not include loan charges. Loan charges relating to Beechdale Road Welfare Centre are spread over a five year period.

<i>Building</i>	<i>Annual cost</i>	<i>Premises replaced</i>	<i>Annual cost</i>	<i>Net additional cost</i>
	<i>£</i>		<i>£</i>	<i>£</i>
WELFARE CENTRES				
Clifton	3,761	John Ryle Health Centre ..	2,086	1,675
Radford	3,761	75 Radford Boulevard ..	648	3,113
Civic Centre ..	1,651	—	—	1,651
Beechdale Road ..	3,286	45 Bracebridge Drive ..	606	2,680
SUB-CENTRES				
Willoughby Street ..	1,180	—	—	1,180
Wollaton Vale ..	1,180	British Legion Hall, Bramcote ..	193	987
Hyson Green ..	1,180	General Dispensary, Gregory Boulevard ..	291	889
Spondon Street ..	1,180	—	—	1,180
Moor Road ..	1,180	Aspley Assembly Hall ..	541	639
Nuthall Road ..	1,180	—	—	1,180
St. Ann's Well Road	1,180	Church Hall, Sherwood Rise	725	455

(ii) Day Nurseries. The financial provision will be affected by the provision of two new buildings to replace Heathcoat Street and Queen's Drive Day Nurseries. The estimated cost of sites for these buildings will be £90,000 and £18,000 respectively, and the capital cost of the buildings will be £10,000 each. The maintenance cost should remain at the same level except for loan charges.

(iii) Welfare Foods. Reductions now being suggested will reduce the cost in 1962/63 and still further reduce it in 1963/64, but the annual expenditure for staff will increase at a later stage. This will be more than offset by saving of rent, etc., when the Health Services Headquarters have been erected.

(iv) **Mother and Baby Home.** The future expenditure on this service is hard to forecast as the Committee are in the process of closing down their own Home and delegating their duties to voluntary bodies. The assumption is made that the process will take three months to complete and that the Mother and Baby Home will be closed by 1st January, 1963. The future demand by unmarried mothers for accommodation is also impossible to assess and it has, therefore, been assumed that it will stay level.

(v) **Dental Treatment.** For the purposes of these estimates, the assumption is made that the clinic will be installed at the Ernest Purser Welfare Centre. No allowance has been made for the cost of alterations, but the rental at the General Dispensary has been included in 1963/64. It is also assumed that extra dental time will become available to increase expenditure by £200 a year from 1963/64 onwards.

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The effect on net revenue expenditure of all the proposals in this Part of the Plan is shown in Appendix 1.

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MIDWIFERY

PRESENT POSITION

Two properties are used exclusively by the Midwifery Service. They are as follows:—

36 Cranmer Street. This is a hostel for midwives, providing accommodation for 5 midwives and pupils. It has 4 bedrooms, a sitting room, dining room and a basement kitchen and was opened as a hostel in 1947, having been purchased in that year for a sum, including costs, of £557. 7s. 2d. The house is very old and not in good condition.

Bramcote House, Bramcote Street. This is a hostel for 6 midwives and pupils. It has 5 bedrooms, a sitting room, dining room and kitchen, and was also opened in 1947, having been purchased in 1950 at a cost of £1,464. 10s. 0d. Again, the house is old and in very poor condition.

The two properties together cost just over £2,000, and in the few years since their purchase more than a similar sum has been spent in keeping them in a fair state of repair.

For the housing of midwives, two unfurnished flats are provided at the Ernest Purser Welfare Centre, as well as twenty-four unfurnished Corporation houses on service tenancies.

Of the 44½ domiciliary midwives employed during 1961/62, 4 were engaged on the specialised care of premature babies, leaving 40½ midwives for home confinements.

In addition 5½ pupils were engaged in the Service throughout the year. Based on the accepted principle that a midwife alone should have a case load of not more than 55 confinements in a year, and a midwife with a pupil 90 confinements, the midwives and pupils between them should have undertaken 2,420 confinements during 1961. In fact, there were 2,858, an excess of 438 over the accepted case load. There was, therefore, a deficiency of 8 midwives.

In addition to midwives there were 9 other staff engaged on duties under this Part of the Plan.

The net cost of the Domiciliary Midwifery Service during 1961/62 was £69,929.

DEVELOPMENT PROPOSALS

(a) **PREMISES.** The present midwives' hostels are uneconomic, inadequate and uncomfortable, and compare most unfavourably with the facilities provided for hospital staff. It is proposed that during 1964/65, they should be replaced by one new *ad hoc* building sited in approximately the centre of the City and providing the following accommodation:—

4 Bed-sitting rooms.
 8 Bedrooms
 1 Lounge (24 persons)
 1 Dining room (24 persons)
 1 District room
 Bathrooms, Toilets, Kitchen, etc.
 1 x 3 Bedroom flat for caretaker and cook/housekeeper.
 6 Garages.

For the proper housing of the remaining midwives 4 x 2 bedroomed furnished flats should be provided as well as the appropriate number of unfurnished flats and houses.

(b) **STAFF.** The Hospital Plan for the Nottingham area provides for the number of maternity beds to be increased from 196 to 290, but the works necessary to achieve this are not planned to start until the second 5 year period of that Plan, namely 1966/67 to 1970/71. Bearing in mind, therefore, the increasing birth rate and the present closure of some maternity beds owing to the shortage of midwives, it is not anticipated that there will be any decrease in the demand for domiciliary midwives in the City during the first 5 years of the Plan. By the end of the second five years, however, some reduction may have been possible.

During the first five months of 1962, the number of home births has increased by 19% over the same period of 1961. If this rise should continue for the remainder of 1962, the number of home confinements attended by the domiciliary midwives will be in the region of 3,400. Since the rate of increase is problematical, however, a figure of 3,100 home confinements has been adopted for the first five years of the Plan, and to allow for the effect of the extra maternity beds, a figure of 2,800 has been used as the basis of estimated staff and financial requirement for the end of the second five years.

Allowing for 5 midwives with pupils throughout the year, and for a premature baby unit with 4 midwives, this gives a total midwife requirement of 57 for the first 5 years and 52 for the last. There is a need, therefore, to recruit $12\frac{1}{2}$ midwives as soon as possible. The recruitment of this staff is spread over three years.

To aid recruitment, it is proposed that instead of loans being granted to midwives to buy their own cars, the authority should purchase the cars themselves. Since almost all midwives make use of the assisted car purchase scheme, it is not anticipated that a great deal of extra expenditure would be involved.

It is hoped that a central call system can be introduced when the new hostel has been erected to be operated by the resident staff at those premises.

Apart from midwives, the extra staff needed will be a caretaker and cook/housekeeper at the hostel. Two other domestics will be necessary, but since $2\frac{1}{4}$ are already employed, this will mean a reduction of $\frac{1}{4}$.

To relieve midwives of certain clerical duties, it is anticipated that the equivalent of 1 full-time clerk will be needed in 1963/64, and another in 1965/66.

(c) **FINANCE.** The capital cost of the hostel will be £22,200 and the site value £5,000. The estimated additional net annual running costs will be £2,574.

The net revenue position for each year is shown in Appendix 1.

HEALTH VISITING

PRESENT POSITION

During 1961/62, there were 38 Health Visitors, 4 students undergoing training, and 6 other staff.

No premises were used exclusively for the Health Visiting Service, the cost of which was £44,493.

DEVELOPMENT PROPOSALS

(a) **PREMISES.** It is not proposed that during the period of the Plan there will be any premises provided exclusively for this Service.

(b) **STAFF.** In view of the rising birth-rate, the increasing number of old people, the development of new techniques and the present shortage of health visitors, it is important that the work of the health visitor should become as selective as possible.

A certain amount of routine visiting must still be carried out, but it is essential that a selection shall be made of those families needing special attention. Co-operation between general practitioners and the local authority staff can ease this task. The work at Welfare Centres, too, must endeavour to identify those children needing special supervision, training or education. It may be useful to institute a special Development Record Card for every child. Additional health visitor sessions at Welfare Centres would help to this end.

Close co-operation between the general practitioners and the health visitor is greatly to be desired, as both they and the patient will benefit. It will not be possible within the compass of this Plan to attach one health visitor to each practice, since there are 82 practices in the City but only 38 health visitors. To be effective, such a scheme must imply a "partnership". It will require careful planning and discussion beforehand.

Arrangements already exist for certain health visitors to attend the General and City Hospitals to obtain information about cases so as to arrange home care for them on discharge. This scheme must be extended with the co-operation of hospital authorities being sought.

The number of health visitors at present employed does not permit of these desired developments. The report of the Working Party on Health Visiting published in 1956, stated that the average ratio of health visitors to population should be in the region of 1 : 4,300. On this basis, the number of health visitors engaged in the City's service should be 73, which is the target for 1971/72.

Strenuous efforts will need to be made to recruit staff up to this figure. The training course should continue and it is hoped will show an increase in staff of about 5 each year. Cars should be provided for roughly $\frac{1}{3}$ rd of the staff to enable them to carry out their duties more effectively.

To deal with the additional clerical duties involved it will be necessary to employ 1 extra clerk for every 12 extra health visitors.

(c) **FINANCE.** The estimated net revenue expenditure is shown in Appendix 1.

HOME NURSING

PRESENT POSITION

The Headquarters of the Home Nursing Service are situated at 13 Regent Street and provide not only the offices for the Service but also furnished accommodation for two members of the staff. It is an old house owned by the personal representatives of J. D. Player, deceased, and is held on lease by the Health Committee, the last lease being for a term of 7 years expiring on the 24th March, 1964.

This is the only building used exclusively by the Service, apart from 11 houses and 5 flats let on service tenancies. Of these, 1 house and 3 flats are furnished by the Health Committee.

In addition to 63 Home Nurses there are 9 other staff at present engaged on the work of the Home Nursing Service. The cost of the Service during 1961/62 was £72,493.

DEVELOPMENT PROPOSALS

(a) **PREMISES.** Apart from the individual housing requirements of members of the service, it is not proposed that there shall be any premises exclusively used for the Home Nursing Service. The intention is that the house at 13 Regent Street shall be

given up in 1965/66 when the Health Services Headquarters have been erected. The offices will be absorbed into the Headquarters, but it will be necessary to provide suitable furnished accommodation for the residents at Regent Street.

For the remainder of the staff the present amount of furnished accommodation, 1 house and 3 flats, should be sufficient, as well as the appropriate unfurnished accommodation.

(b) **STAFF.** It is anticipated that there will be a continued rise in the number of persons requiring home nursing. The Hospital Plan for the Nottingham area provides only for an extra 62 acute and 60 geriatric beds during the first five years of the Plan. This will go some way towards easing the present burden on the Home Nursing Service, but, with the present trend for heavier and longer nursing, due to the tendency for nursing at home instead of in hospital, and in view of the certainty that the number of older people will increase, it cannot be anticipated that there will be anything other than a need for further expansion of the Service.

At the present time, the demands of the acutely ill are being met, but not those of the aged and chronic sick. In view of the shortage of qualified nurses, it may be possible to meet the needs of the latter group by the employment of nursing auxiliaries, who will, however, have to be closely supervised and trained. To this end it is proposed to increase the assistant superintendents by a further 2, who would be in the nature of trainees.

It is, therefore, anticipated that an additional 13 Nurses will be engaged during the next 10 years, as well as 10 nursing auxiliaries and the appropriate clerical help.

(c) **FINANCE.** The estimated financial requirement is set out in Appendix 1.

VACCINATION AND IMMUNISATION

PRESENT POSITION

The only premises used exclusively for this Service are those at No. 134 Mansfield Road, owned by the Estates Committee and held on lease from them.

There were 17 full-time and 1 part-time staff engaged on this work during 1961/62, the cost being £25,619.

DEVELOPMENT PROPOSALS

(a) **PREMISES.** It is proposed that the Health Services Headquarters, to be erected during 1965/66, shall provide the necessary accommodation for the Vaccination and Immunisation Service. The premises at No. 134 Mansfield Road, which have been in use since 1958, will be relinquished to the Estates Committee.

(b) **STAFF.** With the falling off in the numbers of immunisations against poliomyelitis, there has been a reduction of 3 full-time staff during 1962/63. It is anticipated that the staff is now at maintenance level. Though there may well be less special sessions and greater participation by general practitioners, these factors may be offset by future trends in attendance at Welfare Centres. The staff is, therefore, expected to remain at the level existing at the end of 1962/63, unless any new developments require re-expansion of the service.

(c) **FINANCE.** The anticipated net revenue expenditure is shown in Appendix 1.

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

PRESENT POSITION

(i) **Tuberculosis.** There are no premises exclusively used for the Council's staff engaged on these duties. The Tuberculosis Visitors have their offices in the Forest Dene Chest Clinic which is owned by the Sheffield Regional Hospital Board to which a rent is paid.

(ii) **Care of Older Persons.** The Council has provided an Occupation Centre for elderly psychiatric persons at Nuffield House, Claremont Road. The premises are owned by the Health Committee.

(iii) **Social Workers.** The social workers have their offices in the main administrative building of the Health Services.

(iv) **Ultra Violet Ray Clinic.** This Clinic, which is run as part of the Council's proposals under Section 28 of the National Health Service Act, is housed in part of No. 94 Mansfield Road, a property which is owned by the Estates Committee and leased by the Health Committee.

(v) **Loan of Nursing Equipment.** The main bulk of the nursing equipment is held at an improvised store in Arnold Road. The building is a former war-time day nursery erected, and still owned, by the Ministry of Works. No rent is paid.

(iv) **Other Services.** No other premises are used exclusively for any of the other services provided under this heading of the Plan.

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The staff employed for the services mentioned during 1961/62, totalled 25, and the net revenue expenditure was £37,164.

DEVELOPMENT PROPOSALS

(a) PREMISES

(i) **Tuberculosis.** It is not envisaged that the Forest Dene Chest Clinic will be closed during the period of the 10 year plan, and it is anticipated that the Regional Hospital Board will be prepared to continue the existing arrangements.

(ii) **Care of Older Persons.** The estimate of the Registrar General concerning the number of persons over 65 years of age in the City, as at mid 1960, is 34,200. Based upon population projections, it is estimated that this number will rise to 40,000 by 1970 and to 44,000 by 1975. It is, therefore, obvious that the demand for the services provided for the care of the elderly is bound to increase. The only local health authority premises at present used to meet the demand are those at Nuffield House, Claremont Road.

Nuffield House is an old dwelling house purchased by the City Council, with the aid of a grant from the Nuffield Provincial Hospitals Trust, in 1954. After adaptation, it was opened, as an occupation centre for elderly psychiatric patients, by Sir Geoffrey Gibbs, Chairman of the Governing Trustees. Over the past 7 years, the value of the Centre has been proved, and it is proposed that it should be retained for the duration of this Plan.

Although it is only possible to provide for 45 at any one time, there are 80 names on the register, and more could be admitted if there was room. Ample space exists in the grounds of Nuffield House for further building, and it is proposed that during 1965/66 a purpose built centre be erected on part of the site to provide accommodation for a further 50 people. The building should be of a prefabricated nature, and should provide a workshop to permit of light occupation, for which the persons concerned would be paid.

It is considered that more effort must be directed towards the prevention of breakdown in elderly people. To this end, the causes of breakdown, boredom, loneliness and lack of stimulus must be tackled. It is, therefore, proposed that the need for day centres, including workshops for light occupations, canteen facilities and means for recreation, should be thoroughly explored, with the possibility in mind that it may be necessary for one or more to be provided before the end of the present 10 year plan. No expenditure has been included, but the subject may well be dealt with in one of the early annual reviews of the Plan.

(iii) **Social Workers.** When the new Health Services Headquarters, planned to be completed in 1965/66, are opened they will provide the necessary accommodation for the staff of this Service.

(iv) **Ultra Violet Ray Clinic.** Since June 1954, this Clinic has been housed in the ground floor of No. 94 Mansfield Road. These premises, which are shared with the Home Help Service, are a converted dwelling house, owned by the Estates Committee and rented by the Health Committee. The need for the services provided at the Clinic has diminished over the years. At the beginning of the financial year 1962/63, the Health Committee decided to make a charge for treatments to all except old age pensioners and children under 5 years. Since then, the number of treatments given has fallen still further.

As these services are also provided by the Regional Hospital Board elsewhere in the City, it is proposed that the Clinic shall be closed during 1963/64. The whole of the premises at 94 Mansfield Road will then be taken over by the Home Help Service.

(v) **Loan of Nursing Equipment.** The premises used for the storage of this equipment were formerly a war-time day nursery, which was closed in March, 1958. No adaptations were carried out, and there are no real facilities for proper storage, cleansing or sterilisation. Provision has been made in the plans of the Health Services Headquarters for the necessary space, and therefore in 1965/66 the store at Arnold Road will be closed.

(vi) **Other Services.** It is not proposed that there will be any new premises erected exclusively for use by the Services covered by this heading.

(b) **STAFF**

(i) **Tuberculosis.** With the all round decrease in the number of cases on the register, new cases and visits by the Tuberculosis Visitor, it seems likely that reductions in staff will be possible. It is estimated that the number of Tuberculosis Visitors will be reduced from 7 at present to 3 by 1971/72.

(ii) **Care of Older Persons.** In view of the fact that the amount of work in this Service is likely to increase considerably over the next few years, it is anticipated that the amount of medical time required will also increase. It seems likely that the Service will need the whole-time attention of a doctor within the next 3 years, and that a further doctor will need to be appointed during the last 5 year period of the Plan.

The second centre for elderly psychiatric cases will require the same staff as Nuffield House, except that the present Supervisor will look after both Centres if the new one is erected on the same site. At the present time, some members are conveyed to and from their homes in hired transport. It will probably be more economic to provide 2 further 'buses and drivers to eliminate private hiring. Extra clerical assistance will also be needed.

The total number of staff is, therefore, likely to be doubled, reaching 18 by 1971/72.

(iii) **Social Workers.** Though the amount of work in connection with tuberculous cases is likely to reduce, this will be more than offset by the anticipated rise in demand from elderly persons, those requiring convalescence and from cancer patients. In addition, the present trend is for an increase in the incidence of venereal diseases, requiring more contact tracing. It may well be, therefore, that in the second part of the Plan a further social worker may be required. Indeed, if the anticipated increase in the number of health visitors does not materialise, more social workers may be needed earlier.

(iv) **Ultra Violet Ray Clinic.** If the proposal to close the Clinic in 1963/64 is approved, the whole-time permanent staff can be absorbed elsewhere.

(v) **Loan of Nursing Equipment.** The demands for, and issues of, nursing equipment have increased and are likely to increase still further with the emphasis on home care. It is possible, therefore, that a further storekeeper will be required before the end of this Plan.

(vi) **Other Services.** The main functions included in this heading are the provision of Chiropody and Health Education. The present Chiropody service is provided through the agency of the Nottingham General Dispensary and it is proposed that these arrangements should be continued throughout the duration of this Plan. No staff will, therefore, be directly employed for the purpose by the City Council.

One member of staff is at present engaged on Health Education. There is no doubt that it is quite insufficient, and if any headway is to be made against the massive advertising campaigns of commerce and the natural inertia of the public, more staff will be required and more money will need to be spent. Before the 10 years are over, the staff should total at least 3 and the amount of money spent should be trebled, though even this will be a small sum.

(c) FINANCE

The only capital cost included in the Plan is that for the provision of a second centre for the care of elderly psychiatric people, which is estimated to be £22,500. The net revenue costs are shown in Appendix 1.

HOME HELP

PRESENT POSITION

The following is the list of premises which are used exclusively for the Home Help Service:—

94 Mansfield Road
86 Mansfield Road
Rosebery House, Southwark Street—outbuildings only.
45 Gregory Boulevard.

The first property is owned by the Estates Committee, rented by the Health Committee, and used as offices for the Headquarters of the Service. The ground floor, however, contains the Ultra Violet Ray Clinic. The second property is similarly owned and rented, and provides offices for the Southern and Eastern Districts of the Service.

The outbuildings at the Rosebery House Welfare Centre are owned by the Health Committee, and are used as offices for the Northern District. The premises at 45 Gregory Boulevard are on the 1st floor of the building, and are leased from the Westminster Bank Limited. They are used as offices for the Western District.

The Service is organised into a Headquarters and four Districts with accommodation as set out above, the total staff excluding home helpers being 27.

Home Helps (including supervisory staff)	..	276
Clerks .. .. .	..	11½
Domestics .. .. .	..	1½

The home helpers themselves are nearly all part-time workers, and the number varies from week to week. By translating the average total hours worked per week into terms of full-time employees, the number of those employed is 262.

The approximate net cost of the Home Help Service during 1961/62 was £133,631.

DEVELOPMENT PROPOSALS

(a) **PREMISES.** The property at present used for the Headquarters of the Service is a converted dwellinghouse. The Service has only the use of the upper floors, as the Ultra Violet Ray Clinic is situated on the ground floor. It is proposed that, when the Clinic is closed, the whole of No. 94 Mansfield Road shall be used as the Headquarters of the Home Help Service. The premises have been in use since June 1954, and, with the large number of helpers and persons seeking help calling there each day, are not very satisfactory. It is proposed that when the Health Services Headquarters are erected in 1965/66, the premises will be relinquished and the offices transferred to the new building.

Similarly, it is proposed that the property No. 86 Mansfield Road, which has accommodated the Southern and Eastern District offices of the Service since May 1961, shall be relinquished when the Health Services Headquarters are built, and those District offices will be accommodated in the new building.

The other two district offices will remain where they are for the period of the 10 year Plan. The outbuildings at Rosebery House were, after adaptation, occupied in February, 1955. They are still in reasonable repair and should not require any major works of repair. The offices of the Western District at 45 Gregory Boulevard were occupied in March 1957, and are held on a 7 year lease, expiring on 31st December 1963, from the Westminster Bank Limited. It is proposed that negotiations shall be entered into with a view to an extension of the lease to cover the period of this Plan.

(b) **STAFF.** It is not proposed that there shall be any change in the number of supervisory staff employed during the ten years under review. There are 14 such staff at the moment.

The amount of help provided averaged 11,000 hours per week during 1961. It will be less for 1962, since the finance provided only allows for an average of 10,500 hours per week during the financial year 1962/63. As a result of the increasing number of early discharges from hospital, the present tendency for home care and the estimated increase in the number of old people, it is inevitable that the amount of home help provided must be raised. Since it is unlikely that the national demand for mobility of labour will lessen, it is equally unlikely that families will be able to help each other any more than they do at present. The only way in which help can be provided in more and more households is, therefore, for the Committee's Home Help Service to be expanded. It is estimated that the amount of help to be provided will need to be increased by one third over the duration of the Plan, making an average of 14,000 hours per week in 1971/72.

The additional number of helpers to be employed, and cases to be helped, will require an increase in the clerical staff. There is an immediate need for one further general division clerk, which is provided for in 1963/64, and a second clerk of similar grade will be required in 1966/67.

(c) **FINANCE.** The estimated net revenue expenditure is shown in Appendix 1.

MENTAL HEALTH SERVICE

PRESENT POSITION

(a) **PREMISES.** The offices of this service are located in two adjoining houses, Nos. 136 and 138 Mansfield Road. They are owned by the Estates Committee and rented by the Health Committee.

The only other premises used for the purposes of the Mental Health Service are those known as the City Occupation Centre, which are situated on Bestwood Road, Bulwell. The main building was formerly a Smallpox Hospital, which was vested in the Minister of Health in 1948, but was reconveyed to the City Council in 1949. It is owned by the Estates Committee and rent is paid by the Health Committee.

The Centre is regarded as a group of three Centres with a Supervisor in charge of each and a Superintendent in charge of the group. There are 197 names on the Register and the average daily attendance is 162. It is a Centre for subnormals of all ages of either sex.

The staff engaged in the Mental Health Services totals 38, and the net cost during 1961/62 was £41,715.

DEVELOPMENT PROPOSALS

(a) **PREMISES.** The office accommodation consists of two converted dwelling houses, which have been made intercommunicating. They were first occupied by the Service in April, 1940. The premises have all the drawbacks of converted houses and it is proposed that the office accommodation for this Service shall be provided in the Health Services Headquarters, planned for erection during 1965/66. When this move is completed, the premises at 136 and 138 Mansfield Road will be relinquished.

The present City Occupation Centre is a conglomeration of structures of different ages. The main buildings, one of wood and one of corrugated iron lined with wooden boarding, were re-conveyed to the Corporation by the Ministry of Health in 1949 for a nominal sum. The age of the buildings is not known, but undoubtedly their life is limited. These two buildings were joined together by a new brick structure which provides kitchen, dining and toilet accommodation. This building was erected in 1953, and the whole was occupied in September 1953, as a Centre for the mentally subnormal, providing places for 150. The number on the register now is 197, average daily attendance being 162.

There is, therefore, already in effect a total of 47 subnormals waiting for new accommodation, and in addition there are 17 who need facilities similar to those which would be provided in an Advanced Training Unit, and 37 for those of a Special Care Unit. It is essential that a new Special Care Unit and a new Advanced Training Unit, each providing places for 50 persons, be provided at the earliest possible date.

The City Council, in its proposals under the Mental Health Act, 1959, undertook to provide these Units before April 1963, but difficulties have arisen over the question of a site. It is apparent that wherever the two new Units are erected, provision will have to be made during the next 10 years for the replacement of the City Occupation Centre itself. The question of the site should, therefore, be resolved as soon as possible with a view to the erection thereon of a new Special Care Unit and a new Advanced Training Unit during 1963/64 and also the erection of a replacement building for the present City Occupation Centre during the last 5 years of this present 10 year Plan.

With the establishment of the Advanced Training Unit will come, after a period, the need for a sheltered workshop for 50 people. It will provide for those capable of passing through the former Unit, but still incapable of obtaining employment in open industry. It is proposed that this development should be included in the last 5 years of the Plan.

The need for residential accommodation is by no means clear. The possibility of there being a need to establish a hostel for some 25/30 children near to the Special Care Unit will be thoroughly examined and may be the subject for inclusion in the last 5 years of the Plan when the annual reviews are undertaken. Meantime, no provision is being made.

(b) **STAFF.** The present trend towards more out-patient as opposed to in-patient treatment means that more time is spent in the community by the individual suffering from mental disorder. Also, the new procedures under the Mental Health Act, 1959, mean that the mental welfare officer must spend much more time over each compulsory admission. The result is that the staff of mental welfare officers needs to be strengthened by the appointment of two further qualified officers and two mental welfare assistants spread over the next 4 years. It may well be that further qualified staff will need to be appointed during the last 5 years of the Plan, and provision has, therefore, been made for one more in 1971/72. With the additional casework, extra clerical staff will be required.

The new Special Care Unit will require staff in the ratio of 1 to 6 persons in attendance, but the Advanced Training Unit and the Sheltered Workshop will require less, the appropriate ratio being 1 to 15. The necessary domestic and caretaking staff will also have to be provided, as well as clerical assistance for the Superintendent who will have overall control.

No provision is made for staff of hostels until the need is more clear.

(c) **FINANCE.** The financial provision will be affected by the additional staff to be engaged and the capital cost of the new buildings proposed to be erected. These capital costs are estimated to be:—

Special Care Unit	..	..	£23,100
Advanced Training Unit	..	..	£29,500
Occupation Centre	..	..	£77,700
Sheltered Workshop	..	..	£23,600

No provision has been made for site values as it is anticipated that the cost to the Corporation of a new site might well be offset by the value of the site at Bestwood Road.

The net revenue cost of the Service based upon the foregoing proposals is shown in Appendix 1.

OTHER ENACTMENTS AND ADMINISTRATION

PRESENT POSITION

(a) **PREMISES.** The general administration of the Health Services of the City Council is carried out from Huntingdon House. These premises were first used in 1934, when the part of the premises leased by the Health Committee accommodated not only the general administrative staff but, also, some of the Services themselves. With the expansion that has occurred over the years since then, more of the building has been taken over and the Services themselves have moved to other premises in the City. The parts of Huntingdon House now used are held on lease from a private landlord.

There is no accommodation for parking, and rents are paid to the Estates Committee for the use of parts of two public car parks nearby. The Committee's vans are garaged at three separate premises in the City, rents being paid for all but one of the vans.

The staff engaged on general administration duties totals 21.

The appropriate proportions of the expenditure on general administration are charged to the various services and have, therefore, been included in the preceding parts of this Plan. There only remains the expenditure under other enactments, and for 1961/62 this totalled £309.

DEVELOPMENT PROPOSALS

(a) **PREMISES.** The present lease for the premises in use at Huntingdon House is for a term of 7 years expiring on the 24th March, 1968. There is provision for the lease to be assigned to someone else, or for the premises to be sub-let. The rental is £2,000 per annum, plus rates.

The position in regard to premises for administration is most unsatisfactory, and has been recognised to be so for many years. As far back as 1951, the first proposals were considered, and the matter has been reviewed on numerous occasions since then. Plans and models of new premises were approved in 1957, and for the past 5 years the Health Committee have made provision in their capital estimates for a start on the building. The Finance Committee have deferred the project on each occasion.

The detailed case for the provision of the new Headquarters has been fully set out in a report which was considered by the Health Committee in November 1960, and again in December, 1961. On each occasion the Finance Committee were asked to approve the proposal and to allow a start to be made.

The position gets worse as each year passes. The Health Committee's services can only continue to grow, and the task of administering them becomes more and more difficult and needlessly expensive as well as being less efficiently performed. It is, therefore, recommended that the proposal be included in the capital programme for completion during 1965/66.

The lease of the present premises in Huntingdon House will have two years to run, and it is proposed that the premises should be sub-let or assigned for that period, and be given up in 1968. The garage accommodation will also be given up, and the car parking rents cease.

(b) **STAFF.** It is not proposed that the medical staff engaged on administration should be increased during the period of the Plan, but with the expanding services, it will be necessary to strengthen the clerical staff. Proposals to this effect have been accepted by the Health Committee for the past 2 years, but the necessary finance has not been provided. The extra staff now required has been included for 1963/64 and two further clerks later on in the Plan. For the new Headquarters a caretaker will be necessary, as well as a doorman and certain domestic staff, though cleaning services may be carried out by contract, and staff for this has not, therefore, been included.

(c) **FINANCE.** The cost of the Health Services Headquarters as at present planned, is £550,000, though it may be that when further progress can be made, the cost can be reduced. The estimated loan charges on this sum are £37,000 for a period of 30 years. Taking into account present rents, it appears that additional expenditure may be in the region of £30,000 a year, though no account has been taken of possible economies in staff. The increased charges have been reflected from 1966/67 onwards in the estimates of expenditure under the appropriate parts of this Plan, by a total increase of £27,000 per annum in the establishment charges. Running costs of all premises to be superseded by the Headquarters have also been retained to cover the running costs of the new building.

There only remains, therefore, the expenditure on other enactments still to be provided here, and it would seem that these are unlikely to change from the 1962/63 provision, which is £705.

CONCLUSION

The Minister of Health, in Circular 2/62, asks authorities to arrange for the Development Plans to be summarised, and suggests a form in which this could be done. The Plan has been so summarised, and this appears as Appendices 1, 2 and 3 which are attached.

WILLIAM DODD,

Medical Officer of Health.

HUNTINGDON HOUSE,
NOTTINGHAM

12th July, 1962.

APPENDIX 1
NET REVENUE EXPENDITURE

SERVICE	1962/63	1963/64	1964/65	1965/66	1966/67	1971/72
Health Centres	£ 1,751	£ 2,574	£ 7,362	£ 7,277	£ 7,331	£ 6,906
Care of Mothers and Young Children	92,363	93,060	97,333	100,379	110,446	117,688
Midwifery	71,606	76,464	81,394	83,808	86,140	80,935
Health Visiting	49,082	53,680	58,190	62,562	69,310	80,705
Home Nursing	75,333	79,446	80,974	84,891	88,143	92,678
Vaccination and Immunisation	24,424	23,367	23,917	23,967	25,207	26,707
Prevention of Illness, Care and After-Care	34,432	33,741	34,186	36,430	46,111	48,995
Home Help	136,326	139,011	142,856	146,701	158,206	174,036
Mental Health	43,881	47,772	64,021	65,192	68,650	81,523
Expenditure on Other Enactments and on General Administration	705	705	705	705	705	705
Expenditure on Local Health Services not Reckonable for General Grant	1,900	1,900	1,900	1,900	1,900	1,900
TOTALS	531,803	551,720	592,838	613,812	662,149	712,778

APPENDIX 2
LIST OF PREMISES AS AT 31st MARCH, 1962

PURPOSE	LOCATION AND SIZE	REMARKS
Health Centre	John Ryle Health Centre, Greencroft, Clifton. Welfare Centre for 23,000 population with 4 suites for general practitioners.	Unsuitable both as regards location and size. To be replaced.
Welfare Centre	Edwards Lane, Sherwood. Serves population of 21,000	To be retained.
	Ernest Purser Welfare Centre, Wilford Road, Meadows. Serves population of 23,000.	„ „
	75 Radford Boulevard, Serves population of 37,000.	Unsuitable former dwelling house—to be replaced.
	Rosebery House, Southwark Street, Basford. Serves population of 25,000.	Old premises—but to be retained until 1972.
	Beaumont Street, Sneinton. Serves population of 47,000.	To be retained.
	45 Bracebridge Drive, Bilborough. Serves population of 22,000.	Ordinary council house—to be replaced.
	Assembly Hall, Aspley Lane, Aspley. Serves population of 24,000.	Hired hall—to be replaced.
	Baptist Church Hall, Sherwood Rise. Serves population of 35,000.	„ „
	British Legion Hall, Bramcote Lane, Wollaton. Serves population of 16,000.	„ „
	General Dispensary, Gregory Boulevard. Serves population of 19,000.	Hired premises—to be replaced.
	School Health Service Clinic Main Street, Bulwell. Serves population of 21,000.	Hired premises—but to be retained until 1972.

APPENDIX 2

LIST OF PREMISES AS AT 31st MARCH, 1962—*continued*

PURPOSE	LOCATION AND SIZE	REMARKS
Day Nursery	Main Street, Bulwell. 40 places.	To be retained.
	Sycamore Road. 40 places.	„ „
	Pierrepont, Gordon Road. 40 places.	„ „
	Ashburnham Avenue, Radford. 40 places.	„ „
	Pearson Street, Basford. 37 places.	„ „
	Heathcoat Street. 40 places.	Old converted premises—to be replaced.
	95 Queen's Drive, 32 places.	Old converted premises—to be replaced.
Welfare Foods Distri- bution, Central sales and store.	101a and 101b Derby Road, Canning Circus. 2,524 square feet.	To be replaced by provision within Health Services Headquarters.
Mother and Baby Home	8 Mapperley Road. 8 mothers and 6 babies.	To be closed in January, 1963.
Dental Treatment.	General Dispensary, Broad Street. Clinic for mothers.	Hired premises—may be replaced if room at Ernest Purser Welfare Centre.
Midwives Hostel	36 Cranmer Street. 5 midwives or pupils	Old house—to be replaced.
	Bramcote House, Bramcote Street. 6 midwives or pupils.	„ „
Offices and Residential Accommodation.	13 Regent Street. 3,496 square feet.	To be replaced—office accommodation within Health Services H.Q.
Offices	134 Mansfield Road. 1,920 square feet.	To be replaced by provision within Health Services H.Q.
	Forest Dene Chest Clinic, Gregory Boulevard. 1,078 square feet.	To be retained.
Occupation Centre for elderly psychiatric persons.	Nuffield House, Claremont Road, 45 persons.	„ „

APPENDIX 2

LIST OF PREMISES AS AT 31st MARCH, 1962—*continued*

PURPOSE	LOCATION AND SIZE	REMARKS
Ultra Violet Ray Clinic.	94 Mansfield Road, (ground floor only). 496 square feet.	To be closed 1963/64. Premises to be used for offices for a short time, then replaced by provision within Health Services H.Q.
Store for Nursing Equipment.	Former Day Nursery, Arnold Road. 2,388 square feet.	To be replaced by provision within Health Services H.Q.
Offices.	94 Mansfield Road. 1,480 square feet.	„ „
	86 Mansfield Road. 1,900 square feet.	„ „
	Rosebery House, Southwark Street, Basford. Outbuilding only 396 square feet.	To be retained.
	45 Gregory Boulevard. 512 square feet.	„ „
	136 and 138 Mansfield Road, 3,840 square feet.	To be replaced by provision within Health Services H.Q.
Occupation Centre for mentally subnormal.	Bestwood Road, Bulwell. 150 places.	Mainly old buildings. To be replaced.
Offices.	Huntingdon House, Huntingdon Street. Part of building only, 7,800 square feet.	To be replaced by provision within Health Services H.Q.

APPENDIX 2
CAPITAL PROGRAMME
FINANCIAL YEAR 1962-63

SCHEME	LOCATION AND SIZE	NEED	PROVISIONAL COST	EFFECT ON REVENUE EXPENDITURE
Nil	Nil	Nil	£ Nil	£ Nil

APPENDIX 2
CAPITAL PROGRAMME
FINANCIAL YEAR 1963-64

SCHEME	LOCATION AND SIZE	NEED	PROVISIONAL COST	EFFECT ON REVENUE EXPENDITURE
Special Care Unit for Mentally Subnormal.	Site not yet settled. 50 Places.	New Provision. Already a waiting list of 37 persons.	£ Total cost of scheme .. 23,100	Plus .. £ 9,720
Advanced Training Unit.	Site not yet settled. 50 Places.	New Provision. Waiting list is 17 persons and present Centre over-crowded.	Total cost of scheme .. 29,500	Plus .. 8,500
Health Centre.	Bestwood Park Estate. To serve a population of 9,000	New Provision. New Housing Estate. No facilities at present provided.	Total cost of scheme .. 62,000 plus Cost of site approximately 7,500	Plus .. 7,350
Welfare Centre.	Southchurch Drive, Clifton. To serve population of 25,000.	Replacement. To replace inadequate and badly sited temporary facilities at John Ryle Health Centre.	Total cost of scheme .. 25,500 plus Cost of site approximately 7,500	Plus .. 1,675

APPENDIX 2
CAPITAL PROGRAMME
FINANCIAL YEAR 1964-65

Ten Year Plan

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SCHEME	LOCATION AND SIZE	NEED	PROVISIONAL COST	EFFECT ON REVENUE EXPENDITURE
Hostel for Midwives.	Site not yet settled. Accommodation for 12 midwives and pupils.	Replacement. To replace hostels for 5 midwives and 6 midwives in old premises.	£ Total cost of scheme .. 22,200 plus Cost of site .. 5,000	Plus .. £ 2,574
Welfare Centre.	Grant Street, Radford. To serve a population of 20,000.	Replacement. To replace Centre held in old adapted dwelling house.	Total cost of scheme .. 26,000 plus Cost of site .. 15,500	Plus .. 3,113
Day Nursery.	Site not yet settled 40 places.	Replacement. To replace 40 places in old converted dwelling house.	Total cost of scheme .. 10,000 plus Cost of site .. 90,000	Plus .. 281
Welfare Centre.	Civic Centre. To serve a population of 20,000.	New Provision. To relieve pressure on Sneinton Welfare Centre. To be erected in conjunction with Health Services Headquarters. Construction to be commenced in 1964/65 and to be completed in 1965/66.	Cost included in total cost for Health Services Headquarters.	The capital costs included in administration. Running costs only shown below, and included from 1966/67. Plus .. £1,651

APPENDIX 2
CAPITAL PROGRAMME
FINANCIAL YEAR 1965-66

SCHEME	LOCATION AND SIZE	NEED	PROVISIONAL COST	EFFECT ON REVENUE EXPENDITURE
Occupation Centre for elderly psychiatric persons.	Claremont Road. 50 places.	New Provision. Known demand already for some 35 places.	Total cost of scheme .. £ 22,500	Plus .. £ 8,438
Welfare Sub-Centre.	Willoughby Street Re-development Area. To serve a population of 12,000.	New Provision. To serve the Lenton and Dunkirk areas of the City at present without welfare centre facilities.	Total cost of scheme .. £ 6,500 plus Cost of site .. 12,500	Plus .. 1,180
Welfare Sub-Centre.	Wollaton Vale. To serve a population of 15,000.	Replacement. To replace clinic sessions held in hired hall and to meet growing demand from developing residential area.	Total cost of scheme .. £ 6,500 plus Cost of site .. 5,500	Plus .. 987

APPENDIX 2
CAPITAL PROGRAMME
FINANCIAL YEAR 1966-67

SCHEME	LOCATION AND SIZE	NEED	PROVISIONAL COST	EFFECT ON REVENUE EXPENDITURE
Welfare Sub-Centre.	Hyson Green Redevelopment Area. To serve a population of 18,000.	Replacement. To replace clinic sessions held in hired premises.	£ Total cost of scheme .. 6,500 plus Cost of site .. 18,000	Plus .. £ 889
Welfare Sub-Centre	Spondon Street. To serve a population of 15,000.	New Provision. To provide facilities in area where none exist.	Total cost of scheme .. 6,500 plus Cost of site .. 7,500	Plus .. 1,180
Day Nursery.	Site not yet settled. 40 places.	Replacement. To replace 32 places in old converted dwelling house.	Total cost of scheme .. 10,000 plus Cost of site .. 18,000	Plus .. 1,302

APPENDIX 2
CAPITAL PROGRAMME
FINANCIAL YEARS 1967-72

SCHEME	LOCATION AND SIZE	NEED	PROVISIONAL COST	EFFECT ON REVENUE EXPENDITURE
Welfare Centre.	Beechdale Road. To serve a population of 25,000.	Replacement. To replace clinic sessions now held in hired premises.	£ Total cost of scheme .. 26,000 plus Cost of site .. 4,000	Plus .. £ 2,680
Sheltered Workshop for Mentally Sub-normal.	Site not yet settled. 50 places.	New Provision. To relieve expected pressure on Occupation Centre and Advanced Training Unit.	Total cost of scheme .. 23,600	Plus .. 6,541
Welfare Sub-Centre.	Moor Road. To serve a population of 12,000.	Replacement. To replace clinic sessions now held in hired premises.	Total cost of scheme .. 6,500 plus Cost of site .. 6,250	Plus .. 639
Welfare Sub-Centre.	Nuthall Road. To serve a population of 15,000.	New Provision. To provide facilities in an area where none exist.	Total cost of scheme .. 6,500 plus Cost of site .. 4,500	Plus .. 1,180
Welfare Sub-Centre.	St. Ann's Well Road Re-development Area. To serve a population of 18,000.	Replacement. To replace clinic sessions now held in hired premises.	Total cost of scheme .. 6,500 plus Cost of site .. 11,000	Plus .. 455
Occupation Centre for Mentally Subnormal.	Site not yet settled. 150 places.	Replacement. To replace City Occupation Centre of 150 places in buildings of wood and corrugated iron.	Total cost of scheme .. 77,700	Plus .. 4,905

APPENDIX 3

STAFF

CATEGORY OF STAFF	1961/62	1962/63	1963/64	1964/65	1965/66	1966/67	1971/72
Doctors	13½	13½	13	13½	13½	13½	14½
Domiciliary Midwives ..	44½	48½	52½	57	57	57	52
Health Visitors ..	39	41	46	50	55	60	73
Home Nurses	63	68	72	72	74	74	76
Staff(other than Domestic) in Day Nurseries ..	50	50	50	50	50	50	50
Other Nursing Staff ..	24½	21½	20½	20½	21½	20½	18½
Staff(other than Domestic) in Training Centres for Mentally Subnormal ..	16	16	16	29	29	29	33
Home Helps (including Supervisory Staff) ..	276	264½	274½	284½	294½	304½	348
Domiciliary Social or Welfare Workers:							
(a) University or Equiva- lent Professional Training	3	3	3	3	3	3	4
(b) General Training in Social Work ..	—	—	1	1	3	3	4
(c) Other Social Workers	9	9	9	9	8	8	8
(d) Welfare Assistants ..	2	2	2	3	3	4	4
Clerks	73½	70	75½	79½	83½	87½	94
Caretaking	6½	6½	6½	8½	10½	13½	16½
Domestics	31½	29½	29½	31½	32	33½	35½
Drivers	5	5	5	5	5	7	7
Student Nursery Nurses	24	24	24	24	24	24	24
Student Health Visitors ..	4	5	5	5	5	5	5
Nursing Auxiliaries ..	½	½	2	4	6	6	10
Supervising Staff: Nuffield House ..	4	4	4	4	4	7	7
TOTALS ..	688½	680½	710	753½	780½	809½	883½

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READER'S NOTES

A series of horizontal dashed lines for writing notes.

